

Anti-Diversion Customer Profile

Case 3:17-cv-01362 Document 1516-19 Filed 01/13/22 Page 1 of 180 PageID #: 77847

REVIEWED

By Doug Emma at 7:57 am, Mar 31, 2010

CENTRAL

BT5541760 T AND J ENTERPRISES INC

DEA LICENSE INFORMATION

DEA Number: BT5541760
Business Activity Code: A 0 RETAIL PHARMACY
DEA Schedules: 22N 33N 4 5
License Expiration Date: 20121130

CUSTOMER INFORMATION

T AND J ENTERPRISES INC
DBA THE MEDICINE SHOPPE 2402 ADAMS AVENUE
HUNTINGTON WV 25704 3044296716 3044296716
Dominant Accounting Class: INDEPENDENT
First Cardinal Account Created: 3/19/1996
Visited by QRA / # of Visits / Most Recent Visit:

PURCHASE PROFILE

The below metrics are aggregated based on the previous 12 months sales figures

# of Drug Families Purchased:	53	Hydrocodone	28,255
Total Rx Sales (\$):	\$2,655,934.42	Oxycodone	220,170
Control Substance (CS) Sales (\$):	\$662,900.69	Alprazolam	103,120
Rx Dosage Units Sold	2,955,375	Phentermine	4,500
CS Dosage Units Sold:	659,482	Carisoprodol	2600
% CS Purchases	22.00%	Tramadol	28900
% AHOP CS Purchases	12.00%		
Total # of SOM Events:	5		
Most Recent SOM:	7/30/2008		

SOM EVENT SPECIFIC INFORMATION

Drug Family: 9143 OXYCODONE HYDROCHLORIDE
of Events: 2
Overage date: 3/29/2010
Total Accrual: 24,150
Monthly Limit: 24,000
Order#: 6434597
Item#: 3591377

Order not unreasonable.
No threshold adjustments

HISTORICAL PURCHASE DATA

Mar 09	15,800	Sep 09	17,000
Apr 09	16,790	Oct 09	17,730
May 09	16,900	Nov 09	18,650
Jun 09	17,820	Dec 09	23,130
Jul 09	15,500	Jan 10	21,360
Aug 09	15,900	Feb 10	23,790

DISTRACK INFORMATION

Dublin 6 WH 103089
8 BT5541760 9143

REGIONAL DEMOGRAPHICS

Region: South South Atlantic
County / Population: WAYNE 45,824
Population of Zip Income / Household Median Age
17,019 \$27,335.00 38.60

REVIEW CHECKLIST

Customer Profile
Held Order
AR Limit
Shipped Report
Ordered Report
Release/Cancel Report
Validate Order Limits
Customer Inquiry
SCI Repository Review
Contact Customer

QRA DECISION

Release Order
Cut Order
Increase SOM Limits
Report Order to DEA
QRA Site Visit
Sales Site Visit



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3/30/2010 8:46:25 AM

PLAINTIFFS TRIAL
EXHIBIT
P-42116_00001

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000494

P-42116_00001

Anti-Diversion Customer Profile

QRA Site Visit ☐ Sales Site Visit ☐

BT5541760 T AND J ENTERPRISES INC #0290


DEA Activity Code	A	0	RETAIL PHARMACY
DEA Schedules	22N 33N 4 5		
Expiration Date	2009/11/30		
Customer Information			
T AND J ENTERPRISES INC			
DBA THE MEDICINE SHOPPE			
2402 ADAMS AVENUE			
HUNTINGTON	WV	25704	(304) 429-6716
Segment	Customer Group		
RETAIL INDEPENDENT	MEDICINE SHOPPE INDEPEND		
First Cardinal Account Created	3/19/1996		
Customer Visited	No		
Reported # of Monthly Scripts	7500		
Reported Monthly Rx (\$)	\$397,500		
Reported Primary Distributor	Cardinal Health		
CIM Customer	Yes		
Total Rx Sales	\$2,878,877.83		
Control Sales	\$663,176.83		
% Controlled Substance Purchases	22.65%		
% AHOP Control Purchases	53.88%		
# of Drug Families Purchased	40		
Total # of Events	4		
QRA Restriction	No		

Drug Family	9709	PENTAZOCINE HCL
# Events	2	
Overage Date	7/30/2008	
Total Accrual	2,300	
Monthly Limit	2,100	
Order #	3356449	
Item #	3296035	

Jul 07	0	Jan 08	0
Aug 07	0	Feb 08	200
Sep 07	100	Mar 08	0
Oct 07	100	Apr 08	0
Nov 07	0	May 08	-300
Dec 07	100	Jun 08	0

Average Units Per Month	16
% Order Quantity Above Average	14275.00%

Distrack Information		
Dublin 6	WH	77068
8	BT5541760	9709

Reviewed By: Executed By: 

<input checked="" type="checkbox"/> Increase Limits
<input checked="" type="checkbox"/> Release Order
<input type="checkbox"/> Cut Order
<input type="checkbox"/> Report Order to DEA

Thursday, July 31, 2008

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000495

P-42116_00002

Anti-Diversion Customer Profile

QRA Site Visit ☐ Sales Site Visit ☐

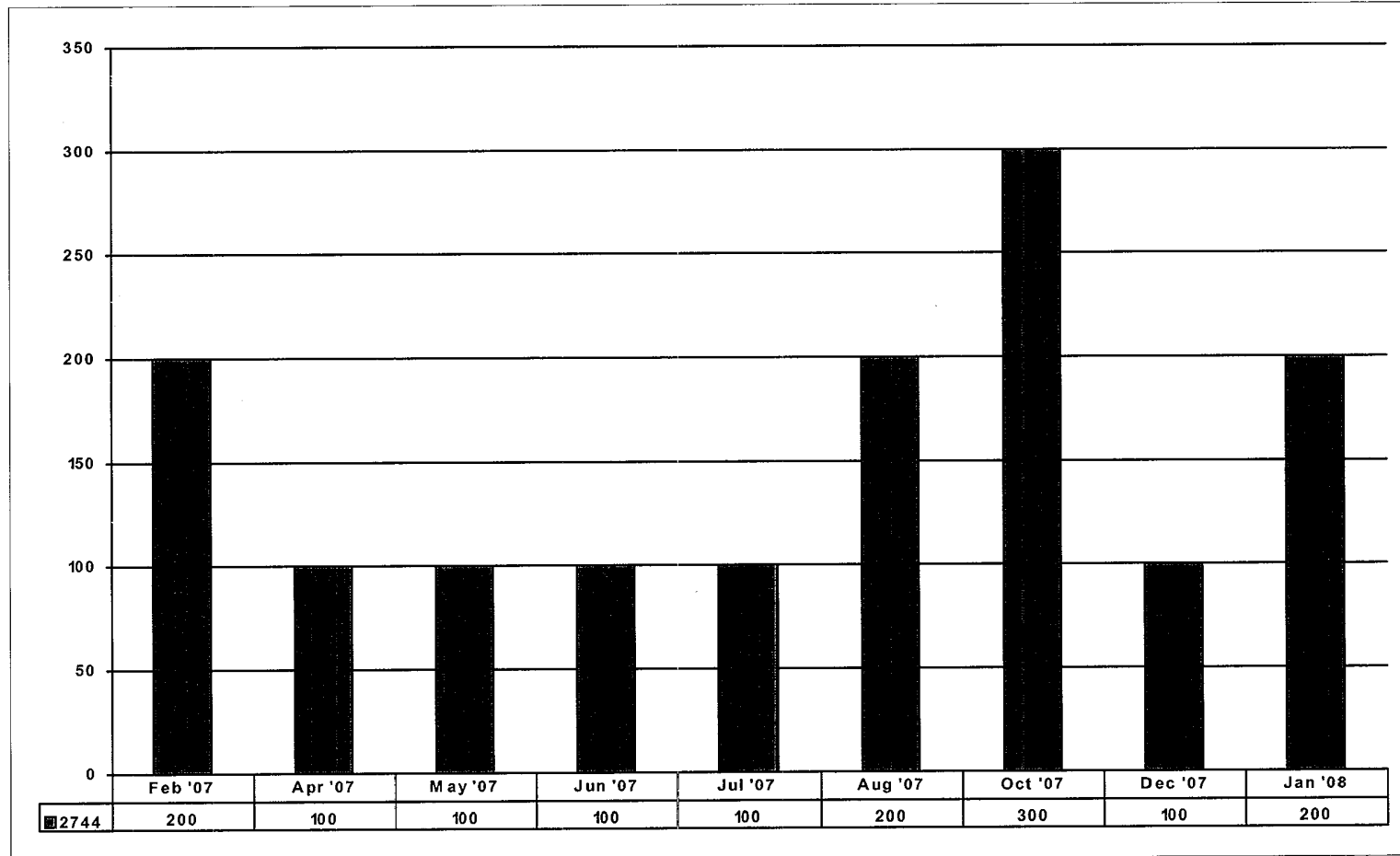
BT5541760 T AND J ENTERPRISES INC

DEA Number	BT5541760	% Controlled Substance Purchases	21.61%
Customer Type	Retail	4 DEA Drugs - % Controlled Sales	50.84%
Accounting Class	20	Total Rx Sales (\$)	\$2,894,447.27
Designated Size	Large	Controlled Substance Sales (\$)	\$631,272.43
Name of Account	T AND J ENTERPRISES INC	Account Restricted	No
Address	DBA THE MEDICINE SHOPPE	Reason Account Restricted	Not Restricted
City	HUNTINGTON	Date Account Restricted	Not Restricted
State	WV	Included on DEA Notification	No
Zip Code	257041322		
Phone Number	(304) 429-6716		
Customer Visited	No		
QRA Decision	Customer Not Visited		
Date of Decision			
CIM Customer	Yes		

Thursday, February 28, 2008

Page 1 of 3

BT5541760 T AND J ENTERPRISES INC



Thursday, February 28, 2008

Page 2 of 3

BT5541760 T AND J ENTERPRISES INC

Item Desc	LIBRIUM CP 10MG 100	Feb '07	200	Aug '07	200	Distrack Customer Information		
Base Code	2744	Mar '07	0	Sep '07	0	Dublin 6	WHG	
Overage Date	2/18/2008	Apr '07	100	Oct '07	300	8	BT5541760	2744
Total Accrual	1,200	May '07	100	Nov '07	0	Increase Limits <input type="checkbox"/>		
Monthly Limit	1,000	Jun '07	100	Dec '07	100			
DC	8	Jul '07	100	Jan '08	200	Release Order <input type="checkbox"/>		
Order#	2503465	Average Units Per Month		115	Cut Order <input type="checkbox"/>			

Thursday, February 28, 2008

Page 3 of 3

Anti-Diversion Customer Profile

QRA Site Visit ☐ Sales Site Visit ☐

BT5541760 T AND J ENTERPRISES INC #0290

DEA Activity Code	A 0	RETAIL PHARMACY
DEA Schedules	22N 33N 4 5	
Expiration Date	2009/11/30	
Customer Information		
T AND J ENTERPRISES INC		
DBA THE MEDICINE SHOPPE		
2402 ADAMS AVENUE		
HUNTINGTON	WV	25704 (304) 429-6716
Segment	Customer Group	
RETAIL INDEPENDENT	MEDICINE SHOPPE INDEPEND	
First Cardinal Account Created	3/19/1996	
Customer Visited	No	
Reported # of Monthly Scripts	7500	
Reported Monthly Rx (\$)	\$397,500	
Reported Primary Distributor	Cardinal Health	
CIM Customer	Yes	
Total Rx Sales	\$2,878,877.83	
Control Sales	\$663,176.83	
% Controlled Substance Purchases	22.65%	
% AHOP Control Purchases	53.88%	
# of Drug Families Purchased	40	
Total # of Events	2	
QRA Restriction	No	

Drug Family	9709	PENTAZOCINE HCL
# Events	1	
Overage Date	7/22/2008	
Total Accrual	2,200	
Monthly Limit	2,100	
Order #	3313204	
Item #	3296035	

Jul 07	0	Jan 08	0
Aug 07	0	Feb 08	200
Sep 07	100	Mar 08	0
Oct 07	100	Apr 08	0
Nov 07	0	May 08	-300
Dec 07	100	Jun 08	0

Average Units Per Month	16
% Order Quantity Above Average	13650.00%

Distrack Information		
Dublin 6	WH	77068
8	BT5541760	9709

Reviewed By: Executed By: 

<input checked="" type="checkbox"/> Increase Limits
<input checked="" type="checkbox"/> Release Order
<input type="checkbox"/> Cut Order
<input type="checkbox"/> Report Order to DEA

*stock issue
reduce accrual*

Wednesday, July 23, 2008

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CAH_FEDWV_00000499

P-42116_00006

VI. ADDITIONAL COMMENTS

Based upon recent purchase history, it appears that your pharmacy may be purchasing greater quantities of prescription drugs containing refer to your fax cover sheet than has been historically the case. Please explain what has prompted the need for the increased purchases of these drug(s):

We have 1 patient on Brand Name
she gets 90 Amonth

Liberon long-

VII. SIGNATURES

[Signature]
Signature of Person Completing this Questionnaire

Lynette B. [unclear]
Printed or Typed Name

2/27/08
Date

(304) 429-6716 - 0290 @
Phone No. & email address medicineshoppe.com
The Medicine Shoppe # 290
Organization/Title

Please Complete and sign this **Retail Pharmacy Self-Questionnaire** along with **Compliance Representations and Warranties for Pharmacy Customers** (on page 6) and fax to: 614-757-5826.

Please note that if we do not receive from you by fax this completed and signed Self-Questionnaire and Compliance Representation and Warranty form within five (5) business days of receipt, your pharmacy's ability to order any more controlled substances from Cardinal Health will be promptly suspended.

*Medicine Shoppe 0290***VI. ADDITIONAL COMMENTS**

Based upon recent purchase history, it appears that your pharmacy may be purchasing greater quantities of prescription drugs containing _____ than has been historically the case. Please explain what has prompted the need for the increased purchases of these drug(s):

*PENTAZOCINE 50mg MFG OUT P.I.M. CONTINUES TO
REORDER
OXYCODONES COVERED WV MEDICAID BIGGEST PBM*

*BT 5541760
SEE ATTACHED UTILIZATION*

VII. SIGNATURES

<p><i>[Signature]</i> _____ Signature of Person Completing this Questionnaire</p> <p><i>Joe McElveth, Jr.</i> _____ Printed or Typed Name</p> <p><i>7/31/08</i> _____ Date</p>	<p><i>304-429-6711</i> _____ Phone No. & email address</p> <p><i>0290 @ Medicine Shoppe . com</i> _____ Organization/Title</p>
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Please Complete and sign this **Retail Pharmacy Self-Questionnaire** along with **Compliance Representations and Warranties for Pharmacy Customers** (on page 6) and fax to: 614-757-5826.

Please note that if we do not receive from you by fax this completed and signed Self-Questionnaire and Compliance Representation and Warranty form within five (5) business days of receipt, your pharmacy's ability to order any more controlled substances from Cardinal Health will be promptly suspended.

Karla Murphy
Quality & Regulatory Affairs

Phone: 614-757-7521 Fax: 614-553-5510

BT5541760

Address	Phone	DEA	Description	Codes	Usage	Current Level	Changes Made	Division
2402 Adams Avenue Huntington, WV 25704	304-429-6716	BT5541760						
			DL-Amphetamine	1100				
			Lisdexamfetamine	1205				
			Phentermine	1640				
			Methylphenidate	1724				
			Phenobarbital	2285				
			Dichloralphenazone	2467				
			Clonazepam	2737				
			Diazepam	2765				
			Zolpidem	2783				
			Meprobamate	2820				
			Alprazolam	2882				
			Lorazepam	2885				
			Temazepam	2925				
			Testosterone	4187				
			Pseudoephedrine	8112				
			Codeine	9050				
			Buprenorphine	9064				
			Dihydrocodeine	9120				
			Oxycodone	9143	16,755	20,000	↑ 24,000	
			Diphenoxylate	9170				
			Hydrocodone	9193				
			Methadone	9250				
			Dextropropoxyphene	9273				
			Morphine	9300				
			Fentanyl	9801				

Date: 8/1/08

8/1/2008 Adjusted By:

SC

Store #: 0290

PDX THE PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
ROXICODONE 30 MG TAB XAN	65100075100340	8	968	1,936.68	2092.20	155.52	7.
TOTAL FOR SELECTED DRUGS		8	968	1,936.68	2092.20	155.52	7.

SELECTION CRITERIA

Tx Date Range	07/01/2008	07/31/2008
Drug Code	ROXI308	ROXI308
GPI		
Drug Schedule		
Canada Sched		
Drug Group		
NDC/DIN Code		
ASHP Class		
Patient Code		
Patient Group		
Physician Code		
Price Code		
T/P Carrier		
T/P Plan		

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000503

P-42116_00010

07/31/2008 16:51 FAX 3044298718

002/025

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
ENDOCET 10-325MG TAB END	65990002200335	15	1250	518.41	983.13	464.72	47.
TOTAL FOR SELECTED DRUGS		15	1250	518.41	983.13	464.72	47.

SELECTION CRITERIA Tx Date Range 07/01/2008
 Drug Code ENDO103
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

07/31/2008
ENDO103

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 16:51 FAX 3044298716

003/025

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CAH_FEDWV_00000504

P-42116_00011

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
ENDOCET 10-650MG	TAB END 65990002200340	2	244	101.82	299.13	197.31	65.
TOTAL FOR SELECTED DRUGS		2	244	101.82	299.13	197.31	65.
SELECTION CRITERIA	Tx Date Range	07/01/2008	07/31/2008	Report Type:			
	Drug Code	ENDO106	ENDO106	Report Order: 1			
	GPI			Number Drugs: 9999			
	Drug Schedule			Summary Only: N			
	Canada Sched			List Each Tx: N			
	Drug Group			Compnd Ingrd: N			
	NDC/DIN Code						
	ASHP Class						
	Patient Code						
	Patient Group						
	Physician Code						
	Price Code						
	T/P Carrier						
	T/P Plan						

07/31/2008 16:51 FAX 3044286716

004/025

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CAH_FEDWV_00000505

P-42116_00012

Store #: 0290

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCOD-APAP 7.5-325 TAB MAL	65990002200327	2	58	19.12	35.05	15.93	45.
TOTAL FOR SELECTED DRUGS		2	58	19.12	35.05	15.93	45.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
Drug Code OXYC753 OXYC753
GPI
Drug Schedule
Canada Sched
Drug Group
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compound Ingrd: N

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT *Huntington, WV*

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCODONE 15 MG	TAB MAL 65100075100325	20	2724	548.57	1264.86	716.29	56.
TOTAL FOR SELECTED DRUGS		20	2724	548.57	1264.86	716.29	56.

SELECTION CRITERIA

Tx Date Range	07/01/2008	07/31/2008
Drug Code	OXYC15	OXYC15
GPI		
Drug Schedule		
Canada Sched		
Drug Group		
NDC/DIN Code		
ASHP Class		
Patient Code		
Patient Group		
Physician Code		
Price Code		
T/P Carrier		
T/P Plan		

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

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CAH_FEDWV_00000507

P-42116_00014

07/31/2008 16:51 FAX 3044296716

008/025

Store #: 0290

PDX Inc PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
ROXICODONE 15 MG TAB XAN	65100075100325	1	84	87.26	94.29	7.03	7.
TOTAL FOR SELECTED DRUGS		1	84	87.26	94.29	7.03	7.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
Drug Code ROXI151 ROXI151
GPI
Drug Schedule
Canada Sched
Drug Group
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

07/31/2008 16:51 FAX 3044296716

007/025

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CAH_FEDWV_00000508

P-42116_00015

PDX INC. PDX PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

Store #: 0290

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
PERCOCET 5-325 MG TAB END	65990002200310	1	84	198.31	226.56	28.25	12.
		1	84	198.31	226.56	28.25	12.
TOTAL FOR SELECTED DRUGS							

SELECTION CRITERIA

Tx Date Range
 Drug Code
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

07/01/2008
 PERC532

07/31/2008
 PERC532

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compound Ingrd: N

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CAH_FEDWV_00000509

P-42116_00016

07/31/2008 16:52 FAX 3044296716

008/025

Store #: 0290

PDA INC. PDA PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
PERCOCET 10-325 M TAB END	65990002200335	1	56	186.77	213.51	26.74	12.
TOTAL FOR SELECTED DRUGS		1	56	186.77	213.51	26.74	12.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code PERC103 PERC103
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

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CAH_FEDWV_00000510

P-42116_00017

07/31/2008 16:52 FAX 3044298716

009/025

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 30 MG	TAB PUR 65100075107430	2	112	458.12	499.61	41.49	8.
TOTAL FOR SELECTED DRUGS		2	112	458.12	499.61	41.49	8.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC3026 OXYC3026
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000511

P-42116_00018

07/31/2008 16:52 FAX 3044296716

010/025

Store #: 0290

PDA INC. PDA PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 40 MG CR TAB PUR	65100075107440	19	1188	6,091.90	6697.29	605.39	9.
TOTAL FOR SELECTED DRUGS		19	1188	6,091.90	6697.29	605.39	9.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC40 OXYC40
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 18:52 FAX 3044296718

011/025

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000512

P-42116_00019

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 60 MG	TAB PUR 65100075107460	2	140	1,044.72	1127.07	82.35	7.
		2	140	1,044.72	1127.07	82.35	7.
TOTAL FOR SELECTED DRUGS							

SELECTION CRITERIA

Tx Date Range	07/01/2008	07/31/2008	Report Type:
Drug Code	OXYC601	OXYC601	Report Order: 1
GPI			Number Drugs: 9999
Drug Schedule			Summary Only: N
Canada Sched			List Each Tx: N
Drug Group			Compnd Ingrd: N
NDC/DIN Code			
ASHP Class			
Patient Code			
Patient Group			
Physician Code			
Price Code			
T/P Carrier			
T/P Plan			

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000513

P-42116_00020

07/31/2008 16:52 FAX 3044296716

012/025

PDX INC. PDX PHARMACY SYSTEM

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

Store #: 0290

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 80 MG CR TAB PUR	65100075107480	22	1964	18,939.26	20431.07	1,491.81	7.
TOTAL FOR SELECTED DRUGS		22	1964	18,939.26	20431.07	1,491.81	7.

SELECTION CRITERIA

Tx Date Range 07/01/2008 07/31/2008

Drug Code OXYC801

GPI

Drug Schedule

Canada Sched

Drug Group

NDC/DIN Code

ASHP Class

Patient Code

Patient Group

Physician Code

Price Code

T/P Carrier

T/P Plan

Report Type:

Report Order: 1

Number Drugs: 9999

Summary Only: N

List Each Tx: N

Compnd Ingrd: N

PDX INC. PDX PHARMACY SYSTEM

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

Store #: 0290

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYIR 5MG	CAP PUR 65100075100110	1	56	17.96	24.91	6.95	27.
TOTAL FOR SELECTED DRUGS		1	56	17.96	24.91	6.95	27.

SELECTION CRITERIA

Tx Date Range
 Drug Code
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

07/01/2008
 OXYI5

07/31/2008
 OXYI5

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000515

P-42116_00022

07/31/2008 16:52 FAX 3044296716

014/025

Store #: 0290

PDX INC. PDX PHARMACY SYSTEMS
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCODONE 5 MG	TAB MAL 65100075100310	5	522	39.63	121.99	82.36	67.
TOTAL FOR SELECTED DRUGS		5	522	39.63	121.99	82.36	67.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
Drug Code OXYC5
GPI
Drug Schedule
Canada Sched
Drug Group
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

07/31/2008 18:52 FAX 3044298718

015/025

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000516

P-42116_00023

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCODONE 5MG IR	CAP ETH 65100075100110	5	454	80.10	120.80	40.70	33.
TOTAL FOR SELECTED DRUGS		5	454	80.10	120.80	40.70	33.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
Drug Code OXYC55 OXYC55
GPI
Drug Schedule
Canada Sched
Drug Group
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

07/31/2008 16:52 FAX 3044296716

016/025

PDX INC. PDX PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

Store #: 0290

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 10 MG CR TAB PUR	65100075107410	5	258	389.67	418.38	28.71	6.
TOTAL FOR SELECTED DRUGS		5	258	389.67	418.38	28.71	6.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC10 OXYC10
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000518

P-42116_00025

07/31/2008 16:52 FAX 3044296716

017/025

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCONTIN 20 MG CR TAB PUR	65100075107420	11	651	1,881.39	2124.60	243.21	11.
TOTAL FOR SELECTED DRUGS		11	651	1,881.39	2124.60	243.21	11.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC201
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 16:52 FAX 3044296716

018/025

Store #: 0290

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCOD/APAP 10-650 TAB WAT	65990002200340	10	786	315.66	540.27	224.61	41.
TOTAL FOR SELECTED DRUGS		10	786	315.66	540.27	224.61	41.

SELECTION CRITERIA Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC1061 OXYC1061
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 18:52 FAX 3044296718

019/025

Store #: 0290

 PDX INC. PDX PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCOD/APAP 10-325 TAB MAL	65990002200335	8	716	284.50	747.94	463.44	61.
TOTAL FOR SELECTED DRUGS		8	716	284.50	747.94	463.44	61.

SELECTION CRITERIA

Tx Date Range	07/01/2008	07/31/2008
Drug Code	OXYC103	OXYC103
GPI		
Drug Schedule		
Canada Sched		
Drug Group		
NDC/DIN Code		
ASHP Class		
Patient Code		
Patient Group		
Physician Code		
Price Code		
T/P Carrier		
T/P Plan		

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 16:52 FAX 3044296716

020/025

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CAH_FEDWV_00000521

P-42116_00028

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

Store #: 0290

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCODONE 20 MG	TAB ETH 65100075100330	1	224	77.78	172.81	95.03	54.
TOTAL FOR SELECTED DRUGS		1	224	77.78	172.81	95.03	54.

SELECTION CRITERIA

Tx Date Range 07/01/2008 07/31/2008
 Drug Code OXYC20112 OXYC20112
 GPI
 Drug Schedule
 Canada Sched
 Drug Group
 NDC/DIN Code
 ASHP Class
 Patient Code
 Patient Group
 Physician Code
 Price Code
 T/P Carrier
 T/P Plan

Report Type:
 Report Order: 1
 Number Drugs: 9999
 Summary Only: N
 List Each Tx: N
 Compnd Ingrd: N

07/31/2008 16:52 FAX 3044296716

021/025

Store #: 0290

PDX Inc PDX GLA MAC 180 SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
-----------	----------------	-----	--------	------	--------	-------	------

TOTAL FOR SELECTED DRUGS

SELECTION CRITERIA	Tx Date Range	07/01/2008	07/31/2008
Drug Code	OXYC1013	OXYC1013	OXYC1013
GPI			
Drug Schedule			
Canada Sched			
Drug Group			
NDC/DIN Code			
ASHP Class			
Patient Code			
Patient Group			
Physician Code			
Price Code			
T/P Carrier			
T/P Plan			

Report Type:
Report Order: 1
Number Drugs: 9999
Summary Only: N
List Each Tx: N
Compnd Ingrd: N

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCOD/APAP 7.5-500 TAB WAT	65990002200330	3	140	44.64	108.25	63.61	58.
TOTAL FOR SELECTED DRUGS		3	140	44.64	108.25	63.61	58.

SELECTION CRITERIA

Tx Date Range	07/01/2008	07/31/2008	Report Type:
Drug Code	OXYC7551	OXYC7551	Report Order: 1
GPI			Number Drugs: 9999
Drug Schedule			Summary Only: N
Canada Sched			List Each Tx: N
Drug Group			Compnd Ingrd: N
NDC/DIN Code			
ASHP Class			
Patient Code			
Patient Group			
Physician Code			
Price Code			
T/P Carrier			
T/P Plan			

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CAH_FEDWV_00000524

P-42116_00031

07/31/2008 18:53 FAX 3044296716

023/025

Store #: 0290

PDA Inc. PDK PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCOD/APAP 5-500MG CAP BAR	65990002200120	1	40	3.60	12.66	9.06	71.
TOTAL FOR SELECTED DRUGS		1	40	3.60	12.66	9.06	71.

SELECTION CRITERIA	Tx Date Range	07/01/2008	07/31/2008	Report Type:
	Drug Code	OXYC5502	OXYC5502	Report Order: 1
	GPI			Number Drugs: 9999
	Drug Schedule			Summary Only: N
	Canada Sched			List Each Tx: N
	Drug Group			Compound Ingrd: N
	NDC/DIN Code			
	ASHP Class			
	Patient Code			
	Patient Group			
	Physician Code			
	Price Code			
	T/P Carrier			
	T/P Plan			

07/31/2008 16:53 FAX 3044296716

024/025

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CAH_FEDWV_00000525

P-42116_00032

Store #: 0290

PDX Inc. PDK Pharmacy System

MEDICINE SHOPPE #0290

DRUG MOVEMENT REPORT

07/31/2008

Drug Name	GPI Number/GCN	#Rx	#Units	Cost	Retail	\$MRG	%MRG
OXYCODONE 30 MG	TAB MAL 65100075100340	29	4036	1,341.63	3165.48	1,823.85	57.
TOTAL FOR SELECTED DRUGS		29	4036	1,341.63	3165.48	1,823.85	57.

SELECTION CRITERIA

Tx Date Range 07/01/2008 07/31/2008

Drug Code OXYC30 OXYC30

GPI

Drug Schedule

Canada Sched

Drug Group

NDC/DIN Code

ASHP Class

Patient Code

Patient Group

Physician Code

Price Code

T/P Carrier

T/P Plan

Report Type:

Report Order: 1

Number Drugs: 9999

Summary Only: N

List Each Tx: N

Compnd Ingrd: N

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000526

P-42116_00033

07/31/2008 16:53 FAX 3044286716

025/025

Monthly Usage Reporting MEDICINE SHOPPE #0290

Karla Murphy

Quality & Regulatory Affairs

Phone: 614-757-7521 Fax: 614-553-5510

Address	Phone	DEA	Description	Codes	Usage	Current Level	Changes Made	Division
2402 Adams Avenue Huntington, WV 25704	304-429-6716	BT5541760						
			DL-Amphetamine	1100				
			Lisdexamfetamine	1205				
			Phentermine	1640				
			Methylphenidate	1724				
			Phenobarbital	2285				
			Dichloralphenazone	2467				
			Clonazepam	2737				
			Diazepam	2765				
			Zolpidem	2783				
			Meprobamate	2820				
			Alprazolam	2882				
			Lorazepam	2885				
			Temazepam	2925				
			Testosterone	4187				
			Pseudoephedrine	8112				
			Codeine	9050				
			Buprenorphine	9064				
			Dihydrocodeine	9120				
			Oxycodone	9143	16,755			
			Diphenoxylate	9170				
			Hydrocodone	9193				
			Methadone	9250				
			Dextropropoxyphene	9273				
			Morphine	9300				
			Fentanyl	9801				

Date:

8/1/2008 Adjusted By:

Howenstein, Kim

From: Howenstein, Kim
Sent: Wednesday, April 14, 2010 2:47 PM
To: Emma, Douglas
Subject: FW: Medicine Shoppe #77068 & #103089 DEA#BT5541760
Attachments: Picture 228.jpg; Picture 229.jpg; Picture 230.jpg; Picture 231.jpg; Picture 232.jpg

This report Doug is specific to Oxy (9143)

3 month period
DC 008

9193- 23,087 Threshold set at 24,000

From: Hammond, Tawney
Sent: Tuesday, April 13, 2010 9:04 AM
To: Howenstein, Kim
Subject: FW: Medicine Shoppe #77068 & #103089 DEA#BT5541760

I am adding to repo

From: Kave, Jesse
Sent: Monday, April 12, 2010 3:32 PM
To: GMB-QRA-Anti-Diversion
Cc: Forst, Christopher
Subject: Medicine Shoppe #77068 & #103089 DEA#BT5541760

Updated utilization for Oxycodone Threshold

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337

Anti-Diversion Customer Profile

REVIEWED

By Christopher J. Forst at 3:02 pm, Mar 01, 2010

CENTRAL

BT5541760 T AND J ENTERPRISES INC

DEA LICENSE INFORMATION

DEA Number:	BT5541760		
Business Activity Code:	A 0	RETAIL PHARMACY	
DEA Schedules:	22N 33N 4 5		
License Expiration Date:	20121130		

CUSTOMER INFORMATION

T AND J ENTERPRISES INC			
DBA THE MEDICINE SHOPPE	2402 ADAMS AVENUE		
HUNTINGTON	WV	25704	3044296716 3044296716
Dominant Accounting Class:	RETAIL INDEPENDENT		
First Cardinal Account Created:	3/19/1996		
Visited by QRA / # of Visits / Most Recent Visit:			

PURCHASE PROFILE

The below metrics are aggregated based on the previous 12 months sales figures

# of Drug Families Purchased:	52	Hydrocodone	26,645
Total Rx Sales (\$):	\$2,635,616.20	Oxycodone	211,700
Control Substance (CS) Sales (\$):	\$641,853.27	Alprazolam	103,520
Rx Dosage Units Sold	2,994,080	Phentermine	4,600
CS Dosage Units Sold:	649,480	Carisoprodol	2100
% CS Purchases	21.00%	Tramadol	27130
% AHOP CS Purchases	53.00%		
Total # of SOM Events:	5		
Most Recent SOM:	7/30/2008		

SOM EVENT SPECIFIC INFORMATION

Drug Family:	9143	OXYCODONE HYDROCHLORIDE
# of Events:	2	Not unreasonable end-of-month order. Order released. No threshold change.
Overage date:	2/28/2010	
Total Accrual:	24,290	
Monthly Limit:	24,000	
Order#:	6277749	
Item#:	3526621	

HISTORICAL PURCHASE DATA

Feb 09	15,320	Aug 09	15,900
Mar 09	15,800	Sep 09	17,000
Apr 09	16,790	Oct 09	17,730
May 09	16,900	Nov 09	18,650
Jun 09	17,820	Dec 09	23,130
Jul 09	15,500	Jan 10	21,360

DISTRACK INFORMATION

Dublin 6	WH	103089
8	BT5541760	9143

REGIONAL DEMOGRAPHICS

Region:	South	South Atlantic
County / Population:	WAYNE	45,824
Population of Zip	Income / Household	Median Age
17,019	\$27,335.00	38.60

REVIEW CHECKLIST

- Customer Profile
- Held Order
- AR Limit
- Shipped Report
- Ordered Report
- Release/Cancel Report
- Validate Order Limits
- Customer Inquiry
- SCI Repository Review
- Contact Customer

QRA DECISION

- Release Order ☒
- Cut Order
- Increase SOM Limits
- Report Order to DEA
- QRA Site Visit
- Sales Site Visit



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3/1/2010 8:33:14 AM

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000529

P-42116_00036

Howenstein, Kim

From: Emma, Douglas
Sent: Wednesday, April 14, 2010 3:17 PM
To: Howenstein, Kim
Subject: FW: Medicine Shoppe #77068 & #103089 DEA#BT5541760
Attachments: Picture 228.jpg; Picture 229.jpg; Picture 230.jpg; Picture 231.jpg; Picture 232.jpg

Kim,
I made a TH adjustment to 26502
DE

From: Howenstein, Kim
Sent: Wednesday, April 14, 2010 1:47 PM
To: Emma, Douglas
Subject: FW: Medicine Shoppe #77068 & #103089 DEA#BT5541760

This report Doug is specific to Oxy (9143)

3 month period
DC 008

9193- 23,087 Threshold set at 24,000

From: Hammond, Tawney
Sent: Tuesday, April 13, 2010 9:04 AM
To: Howenstein, Kim
Subject: FW: Medicine Shoppe #77068 & #103089 DEA#BT5541760

I am adding to repo

From: Kave, Jesse
Sent: Monday, April 12, 2010 3:32 PM
To: GMB-QRA-Anti-Diversion
Cc: Forst, Christopher
Subject: Medicine Shoppe #77068 & #103089 DEA#BT5541760

Updated utilization for Oxycodone Threshold

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337

Hammond, Tawney

From: "Inquisite Server" [administrator@myserver.com]
Sent: Thursday, April 01, 2010 2:57 PM
To: GMB-QRA-AD-Thresholds
Subject: Response for HSCS-P Threshold Event

E-mail notification for survey response

Survey Title: HSCS-P Threshold Event

Respondent Unique Key: INQ-20100401134731-2086775484 Response Date: Thu, Apr 01, 2010 13:56:56

Page 1

Facility Name:

{Enter text answer}

[The Medicine Shoppe]

Facility Address:

{Enter text answer}

[2402 Adams Avenue Huntington, WV 25704]

Facility Contact:

{Enter text answer}

[Joe McGlothlin]

Facility Phone:

{Enter text answer}

[3044296716]

Facility Fax No.:

{Enter text answer}

[3044291924]

Please outline the underlying factors that are contributing to your need for the increased quantities of the drug family:

{Enter answer in paragraph form}

[We used more Oxycodone in the month of March due to a local pharmacy Safe-Script sending patients to us. Physicians writing orders were Dr A.Ozturk, R. Memon, and D.H. Webb physicians are located in Huntington, WV. A. Ozturk B01101512 R. Memon FM1057492 D.H. Webb AW4345167]

Name of Drug Family held per Regulatory Review:

{Enter text answer}

[Oxycodone]

Facility DEA#:

{Enter text answer}

[BT5541760]

Name of Person Responding:

{Enter text answer}

[Joe McGlothlin]

Store #: 0290

04/08/2010

PDX Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1
01/01/2010-03/31/2010

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
ROXICET 5-325 MG	TAB ROX 00054465029	59	3539	222.68	620.19	397.51	64.09	6.74
ROXICET 5-325/5	SOL ROX 00054368663	1	480	34.07	42.95	8.88	20.68	8.88
TOTAL FOR SELECTED DRUGS		60	4019	256.75	663.14	406.39	61.28	6.77

SELECTION CRITERIA

Tx Date Range	01/01/2010	03/31/2010	Report Type:
Drug Code	ROXI532	ROXI550	Report Order: 1
GPI			Number Drugs: 100
Drug Schedule			Summary Only: N
Canada Sched			List Each Tx: N
Drug Group			Compound Ingrd: Y
NDC/DIN Code			
ASHP Class			
Patient Code			
Patient Group			
Physician Code			
Price Code			
T/P Carrier			
T/P Plan			

Store #: 0290

04/08/2010

PDX Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1
01/01/2010-03/31/2010

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
PERCOCET 7.5-325M TAB END	63481062870	4	252	838.51	858.55	20.04	2.33	5.01
TOTAL FOR SELECTED DRUGS		4	252	838.51	858.55	20.04	2.33	5.01

SELECTION CRITERIA Tx Date Range 01/01/2010 03/31/2010 Report Type:
Drug Code PERC103 PERC755 Report Order: 1
GPI Number Drugs: 100
Drug Schedule Summary Only: N
Canada Sched. List Each Tx: N
Drug Group Compnd Ingrd: Y
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Store #: 0290

04/08/2010

PDA INC. PDA PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORTPage: 1
01/01/2010-03/31/2010

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
ROXICODONE 30 MG TAB XAN	66479058210	9	980	2,286.92	2400.96	114.04	4.75	12.67
TOTAL FOR SELECTED DRUGS		9	980	2,286.92	2400.96	114.04	4.75	12.67

SELECTION CRITERIA Tx Date Range 01/01/2010 03/31/2010 Report Type:
Drug Code ROXI151 ROXI308 Report Order: 1
GPI Number Drugs: 100
Drug Schedule Summary Only: N
Canada Sched List Each Tx: N
Drug Group Compnd Ingrd: Y
NDC/DIN Code
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Store #: 0290

04/08/2010

PDX INC. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORTPage: 1
01/01/2010-03/31/2010

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
ENDOCET 10-325MG	TAB END 60951071270	45	3540	1,476.75	2284.71	807.96	35.36	17.95
ENDOCET 7.5-325M	TAB END 60951070070	9	652	252.44	393.51	141.07	35.85	15.67
ENDOCET 10-650MG	TAB END 60951079770	1	56	23.37	29.37	6.00	20.43	6.00
TOTAL FOR SELECTED DRUGS		55	4248	1,752.56	2707.59	955.03	35.27	17.36

SELECTION CRITERIA

Tx Date Range	01/01/2010	03/31/2010	Report Type:
Drug Code	ENDO103	ENDO755	Report Order: 1
GPI			Number Drugs: 100
Drug Schedule			Summary Only: N
Canada Sched			List Each Tx: N
Drug Group			Compnd Ingrd: Y
NDC/DIN Code			
ASHP Class			
Patient Code			
Patient Group			
Physician Code			
Price Code			
T/P Carrier			
T/P Plan			

Anti-Diversion Customer Profile

QRA Site Visit ☐ Sales Site Visit ☐



BT5541760 T AND J ENTERPRISES INC

Drug Family	9143	OXYCODONE HYDROCHLORIDE
# Events	1	
Overage Date	7/30/2008	
Total Accrual	20,060	
Monthly Limit	20,000	
Order #	3352444	
Item #	3591385	

Jul 07	17,260	Jan 08	18,790
Aug 07	15,760	Feb 08	15,160
Sep 07	17,760	Mar 08	16,460
Oct 07	19,080	Apr 08	16,460
Nov 07	17,510	May 08	18,950
Dec 07	16,800	Jun 08	16,960

Average Units Per Month	17,241
% Order Quantity Above Average	16.35%

Distrack Information		
Dublin 6	WH	77068
8	BT5541760	9143

Reviewed By: Executed By: 

<input checked="" type="checkbox"/> Increase Limits	<input type="checkbox"/>
<input checked="" type="checkbox"/> Release Order	<input checked="" type="checkbox"/>
<input type="checkbox"/> Cut Order	<input type="checkbox"/>
<input type="checkbox"/> Report Order to DEA	<input type="checkbox"/>

not D's

Thursday, July 31, 2008

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000536
P-42116_00043



Current Date: 2/27/2008

Data File Release Date: 02/05/2008

Drug Enforcement Administration (DEA) Datafiles -Both

Registrant Profile

for

T AND J ENTERPRISES INC

Address:

DBA THE MEDICINE SHOPPE
2402 ADAMS AVENUE
HUNTINGTON

State / Zip: WV 25704

DEA Number: BT5541760

Business Activity Code: A

Business Activity Sub Code: 0

Drug Schedule: 22N 33N 4 5

Expiration Date: 11/30/2009



<https://www.deanumber.com/Library/DEA/PopUpResults.asp?SessionID=%7BA7D7647...> 2/27/2008

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000537

P-42116_00044



Current Date: 2/27/2008

Data File Release Date: 02/05/2008

Drug Enforcement Administration (DEA) Datafiles -Both

Registrant Profile

for

OZTURK, AHMET H MD

Address: CABELL HUNTINGTON HOSPITAL
REGIONAL PAIN MANAGEMENT CTR
1623 THIRTEENTH AVENUE
HUNTINGTON

State / Zip: WV 25701

DEA Number: BO1101512

Business Activity Code: C

Business Activity Sub Code: 0

Drug Schedule: 22N 33N 4 5

Expiration Date: 12/31/2008



<https://www.deanumber.com/Library/DEA/PopUpResults.asp?SessionID=%7BA7D7647...> 2/27/2008



Current Date: 2/27/2008

Data File Release Date: 02/05/2008

Drug Enforcement Administration (DEA) Datafiles -Both

Registrant Profile

for

CARAWAY, DAVID L MD

Address: THE CENTER FOR PAIN RELIEF TRI STATE, PL
2900 FIRST AVEUNE
1ST FLOOR
HUNTINGTON

State / Zip: WV 25702

DEA Number: BC7126142

Business Activity Code: C

Business Activity Sub Code: 0

Drug Schedule: 22N 33N 4 5

Expiration Date: 8/31/2009



<https://www.deanumber.com/Library/DEA/PopUpResults.asp?SessionID=%7BA7D7647...> 2/27/2008

WV.GOV - WVDHHR.ORG - WVBOM

DHHR Site Search - DH



West Virginia Board of Medicine

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West Virginia Board of Medicine Licensee Search

Choose a search type, enter search information, select from the results, and view details. For help with searching or understanding the information displayed, click Help. This link will open a new screen which you may keep available for reference.

Terms of Use/Disclaimer

Printer

Search Results: Licensee Detailed Information

Full Name: **DAVID LEE CARAWAY, M.D.**

Born: 1956

Preferred Mailing Address: P.O. BOX 11531
CHARLESTON, WV 25339-1531

Primary Work Location: 2900 1ST AVE.
HUNTINGTON, WV 25702 (KANAWHA CO.)

Permanent License: PERMANENT MEDICAL # 18714 ACTIVE

Originally Granted: 9/9/1996

Next Expires: 6/30/2008

Temporary License: # A0722 EXPIRED

Issued: 7/24/1996

Expired: 9/9/1996

Drug Dispensing Certificate: # 02431 ACTIVE

Originally Granted: 5/5/2000

Next Expires: 6/30/2009

Also Licensed Or Has Been **VIRGINIA**
Licensed In:

Medical School: UNIVERSITY OF VIRGINIA SCHOOL OF MEDICINE, VA
(05/17/1992)

Post-Graduate Training: UNIVERSITY VA HS CTR, CHARLOTTESVILLE, VA (06/30/2000)

Primary Specialty ANESTHESIOLOGY
(Self-Designated):

Secondary Specialty PAIN MEDICINE
(Self-Designated):

PAs Currently Supervised: JESSICA ERIN RULEN-RIDDLE, PA

Discipline: NO DISCIPLINE CASES ON RECORD

Malpractice: 1 CASE -- MORE INFORMATION

1 Results Found

Last Name Like: "**caraway**" First Name Like: "" Profession: **Any**

<http://www.wvdhhr.org/WVbom/licenseSearch.asp?QueueNumber=0&Radio=1&keyword...> 2/27/2008

WV.GOV - WVDHHR.ORG - WVBOM

DHHR Site Search - DH



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West Virginia Board of Medicine Licensee Search

Choose a search type, enter search information, select from the results, and view details. For help with searching or understanding the information displayed, click Help. This link will open a new screen which you may keep available for reference.

[Terms of Use/Disclaimer](#)

[Printer](#)

Search Results: Licensee Detailed Information

Full Name: **AHMET HUSAMETTIN OZTURK, M.D.**

Born: 1953

Preferred Mailing Address: PAIN CARE, PLLC
P. O. BOX 8166
HUNTINGTON, WV 25705

Primary Work Location: PO BOX 8166
HUNTINGTON, WV 25705 (CABELL CO.)

Permanent License: PERMANENT MEDICAL # 15431 ACTIVE

Originally Granted: 3/14/1988

Next Expires: 6/30/2009

Drug Dispensing Certificate: # 00378 ACTIVE

Originally Granted: 7/1/1991

Next Expires: 6/30/2009

Also Licensed Or Has Been **FLORIDA NEW JERSEY NEW YORK OHIO**
Licensed In:

Medical School: MEDICAL FACULTY, ANKARA UNIVERSITY (TURKEY)
(08/17/1977)

Post-Graduate Training: METHODIST HOSPITAL, BROOKLYN, NY (06/30/1987)

Primary Specialty PAIN MEDICINE
(Self-Designated):

Secondary Specialty ANESTHESIOLOGY
(Self-Designated):

PAs Currently Supervised: NO CURRENT SUPERVISION

Discipline: NO DISCIPLINE CASES ON RECORD

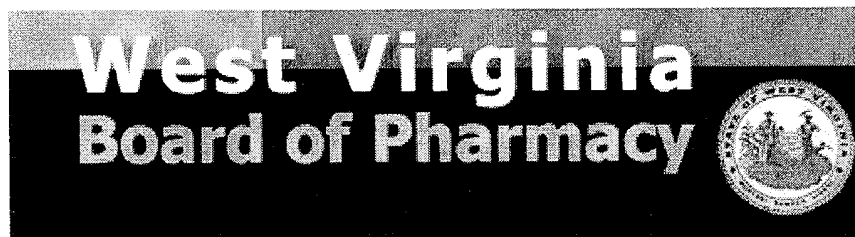
Malpractice: 2 CASES -- MORE INFORMATION

55 Results Found

Last Name Like: "oz" First Name Like: "" Profession: Any

Name ▲	Profession	City,
MUNOZ-POSADA, EMMANUEL	MD	WHEELING
OZON, ROBERT KENT	MD	PASCAGOUL
OZTURK, AHMET HUSAMETTIN	MD	HUNTINGTON

<http://www.wvdhhr.org/WVbom/licenseSearch.asp?QueueNumber=0&Radio=1&keyword...> 2/27/2008



Business Details

License Number	SP0550702
Business Type	Single-Site Community Pharmacy
Business Name	Medicine Shoppe (The)
Address1	2402 Adams Avenue
Address2	
City	Huntington
State	WV
Zip Code	25704
County	Cabell
Phone	
Responsible Person Name (Pharmacist In Charge)	Joseph C. McGlothlin
Date Issued	
Expiration Date	06/30/2009
Status	Active
Disciplinary Action	No

[Another Query](#)

Pharmacy Home Page

This data is an accurate representation of information currently maintained by the West Virginia Board of Pharmacy as of September 18, 2008.

http://www.state.wv.us/pharmacy/index.cfm?fuseaction=Business.fa_GetBusinessDetail&... 9/22/2008



Individual Details

License Number	RP0003911
License Type	Registered Pharmacist
Name	McGlothlin, Joseph C.
State of Current Residence	WV
Date Issued	
Expiration Date	06/30/2009
License Status	Active
Disciplinary Action	No

[Another Query](#)

[Pharmacy Home Page](#)

This data is an accurate representation of information currently maintained by the West Virginia Board of Pharmacy as of January 30, 2008.

http://www.state.wv.us/pharmacy/index.cfm?fuseaction=Individual.fa_GetIndividualDetail... 2/27/2008



CardinalHealth

T&J Enterprises, Inc. Compliance Representations and Warranties for Pharmacy Customers:

37A The Medicine Shoppe

("CUSTOMER") REPRESENTS AND WARRANTS THAT IT

1. WILL ABIDE BY ALL APPLICABLE LAWS, RULES, REGULATIONS, ORDINANCES AND GUIDANCE OF FEDERAL DRUG ENFORCEMENT ADMINISTRATION ("DEA"), THE STATES INTO WHICH IT DISPENSES CONTROLLED SUBSTANCES AND THE STATES IN WHICH IT IS LICENSED.
2. WILL NOT DISPENSE CONTROLLED SUBSTANCES IF IT SUSPECTS THAT A PRESCRIPTION IS NOT ISSUED FOR A LEGITIMATE MEDICAL PURPOSE OR IN THE NORMAL COURSE OF PROFESSIONAL PRACTICE.

In addition, Customer warrants that it understands that Cardinal Health is required by DEA regulations to report to the local DEA Diversion field office any instances of suspicious orders of controlled substances, and agrees to act in good faith in assisting Cardinal Health to fulfill its obligation. To that end, Customer agrees that it will be alert for red flags of suspicious orders, including but not limited to:

1. Numerous controlled substance prescriptions written for the same drugs, in the same quantities for the same time period by the same or different prescribers or group of prescribers for the same patient;
2. Numerous controlled substance prescriptions written for the same person or several persons by the same prescriber or group of prescribers;
3. Numerous prescriptions written for the same patient by prescribers located in different states than the patient;

Customer agrees that if any of the above-noted or other red flags exist, it is prudent to contact the prescriber to validate the legitimacy of the prescription and/or to discontinue filling prescriptions from the prescriber, group of prescribers, or customer in question. In addition, the pharmacist should contact the State Board of Pharmacy or local DEA Diversion Field Office (see Appendix N, DEA Pharmacist's Manual, April 2004).

Customer acknowledges that Cardinal Health may provide a copy of this agreement to the DEA or any other state or federal regulatory agency or licensing board.

Customer agrees that any failure to comply with this Agreement may result in the immediate termination of the relationship between Cardinal Health and Customer, in whole or in part, notwithstanding any other agreements to the contrary.

Agreed to by a duly authorized officer, partner, or principal of pharmacy Customer.

Signature: *[Signature]*

Full Name (print): Joe McGlothlin

Title: R.Ph.

Date: 2/27/08

Corporate Compliance - Revised 10/18/07



CardinalHealth

RETAIL PHARMACY SELF-QUESTIONNAIRE

I. GENERAL

1. Form completed By (Name)/Date	Lynnette Bunnell	2/01/08
2. Pharmacy Name	T-J Enterprises, Inc	
3. DBA ("doing business as" if name differs from corporate name or name on licenses)	The Medicine Shoppe #290	
4. Has pharmacy ever operated under a different name?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
5. If yes, what name(s)?		
6. Pharmacy Address	2402 Adams Ave, Huntington, WV 25704	
7. Pharmacy Phone	(304) 429-6716	
8. Pharmacy Fax	(304) 429-1924	
9. Name of Pharmacist in charge. (List all licensed staff in Section VI)	Joseph C. McClothlin, R.Ph.	
10. DEA Registration # of pharmacy	BT 5541760	
11. Does your pharmacy sell anything other prescription drugs (e.g., does the pharmacy have a front end)? If so, please describe what merchandise is sold (e.g., durable medical equipment; home healthcare aids, vitamins, cosmetics, etc.)?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If yes, please describe: DME, Home Healthcare Aids, Vitamins, Medicine Shoppe line of OTC.	

II. OWNERSHIP

12. Ownership type (check one)	<input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other
13. If corporation, indicate state of incorporation	West Virginia
14. Owner(s) name or Corporate Officers if a Corporation	Joseph C McClothlin, President Neda McClothlin, Vice-President

Rev. 12/27/07

Page 1 of 7

15. Owner's Business Address	2402 Adams Ave, Hawthorne, WV 25904
16. Owner's Phone	(304) 429-6716
17. Owner's Fax	(304) 429-1924
18. Number of years owner has operated pharmacy	
19. Is owner a licensed pharmacist? If so, please identify which State(s) and license number(s)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO • State(name) <u>WV</u> Pharmacist License # <u>3911</u> • State(name) _____ Pharmacist License # _____ • State(name) _____ Pharmacist License # _____
20. Does owner operate/own any other pharmacies?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
21. If yes, provide the following (Attach additional sheets as necessary)	
Name	
Address	
State and Pharmacy License #	
22. Pharmacy owner must sign a compliance agreement requiring the pharmacy to adhere to all rules and regulations regarding diversion (copy attached at end of this form). Will this agreement be signed and provided to Cardinal Health?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

III. PRIOR HISTORY AND ASSOCIATIONS

23. Has your pharmacy ever had a DEA registration suspended or revoked?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
a) If yes, provide details	
24. Has the pharmacy owner ever had a DEA registration suspended or revoked?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
a) If yes, provide details	

IV. BUSINESS INFORMATION

25. Please provide a list of names of all pharmaceutical distributors pharmacy has used within the last 24 months	<i>Pharmed Pharma Andro Pharma</i>
26. Is the pharmacy affiliated with any other pharmacies or Internet websites?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
a) If yes, provide the following (Attach additional sheets as necessary)	
Name	
Address or URL Address	
Phone	
27. How does pharmacy receive business (check all that apply)?	<input checked="" type="checkbox"/> Internet <input checked="" type="checkbox"/> Fax <input type="checkbox"/> Mail Order <input checked="" type="checkbox"/> Phone <input checked="" type="checkbox"/> Walk in
a) For each type of business, what percentage of total business does that represent?	<u>1</u> % Internet <u>29</u> % Fax <u> </u> % Mail Order <u>30</u> % Phone <u>40</u> % Walk in
28. Which states does pharmacy ship prescriptions into (if any)?	
29. Is pharmacy licensed for sales into states which it dispenses?	<input type="checkbox"/> YES <input type="checkbox"/> NO
a) If so, identify which states and provide the pharmacy license number(s) for those state(s).	State(name) <u> </u> Pharmacy License # <u> </u> State(name) <u> </u> Pharmacy License # <u> </u> State(name) <u> </u> Pharmacy License # <u> </u>
30. Does pharmacy fill prescriptions for out-of-state patients?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
31. Does the pharmacy routinely fill prescriptions written by prescribers in other states?"	<input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO
a) If yes, what % of prescriptions?	a) If yes, the percentage of prescriptions filled by your pharmacy for out-of-state prescribers is : <u> </u> %

b) If yes to No. 31(a), please provide the name(s) and address(es) of your most frequent out-of-state prescriber(s):			
Name of Out-of-State Prescriber	Address	Prescriber's Name	Prescriber's DEA #
32. How many prescriptions does your pharmacy fill on average?	Daily <u>250</u> Monthly <u> </u>		
33. Hours of operation of pharmacy	<u>Monday - Friday 9:30-6:00</u> <u>Saturday 9:30-1:00</u>		
34. Is the pharmacy a closed door pharmacy?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
35. Does the pharmacy service nursing homes, long term care facilities ("LTFC"), hospice or other inpatient facilities? If so, describe.	Nursing Home <input type="checkbox"/> YES <input type="checkbox"/> NO LTFC <input type="checkbox"/> YES <input type="checkbox"/> NO Hospice <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Other <input type="checkbox"/> YES <input type="checkbox"/> NO		
a) If yes, what percentage of the pharmacy's business is attributable to each of those types of facilities? Request copies of agreements.	Nursing Home <u> </u> % LTFC <u> </u> % Hospice <u>1</u> % Other <u> </u> %		
36. Does the pharmacy have a Internet web site?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
a) If yes, provide web address	<u>0290@medicineshoppe.com</u>		
37. How does pharmacy receive payment for products and in what approximate percentage?	Insurance	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	% of Revenue <u>20%</u>
	Medicare/Medicaid	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	% of Revenue <u>75%</u>
	Cash	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	% of Revenue <u>5%</u>
	Other	<input type="checkbox"/> YES <input type="checkbox"/> NO	% of Revenue <u> </u>
a) If other, provide details			

38. What % of pharmacy's prescription sales are controlled substances?		15%	
39. Does the pharmacy service pain management clinics/nursing homes/long term care facilities (LTCF)/hospice?		Ph. Mgmt. Cl. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Nursing Home <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, how many nursing homes _____ How many beds per nursing home: _____ LTCF <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, how many LTCF: _____ How many beds per LTCF: _____ Hospice <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
a) If yes, list the following for each pain management clinic		Provide copy of contracts (if it exists) for hospice, LTCF and nursing home(s) and contact name at these institutions	
Name of Clinic	Address of Clinic	Prescriber's Name	Prescriber's DEA #
CHH Regional Pain Management Center	1623 13th Ave Hurricane, WV 25701	Dr. Ahmet Ozturk	B01101512
	2900 1st Ave Hurricane, WV 25702	Dr. David Casaway	BC7126142

V. DESCRIPTION OF NEIGHBORHOOD

40. Is the pharmacy located within a medical center?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
41. Is the pharmacy located within a strip mall?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
42. General description of neighborhood (e.g., urban; rural; low income or upscale area; business district; residential area, etc.)	Residential Area
43. Are there hospitals, doctors' offices or medical clinics located in vicinity of the pharmacy?	Doctor Offices <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Medical Clinics <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
a) If so, identify name, type, address, proximity to the pharmacy	Doctor Offices <u>Dr. Greg Holmes</u> <u>1/2 m.</u> Medical Clinics <u>Valley Health Services</u> <u>1/2 m.</u>

Anti-Diversion Early Dialogue Profile

Case 3:17-cv-01362 Document 1516-19 Filed 01/13/22 Page 57 of 180 PageID #: 77903

REVIEWED

CENTRAL

BT5541760 T AND J ENTERPRISES INC

By Doug Emma at 2:20 pm, Sep 09, 2010

DEA LICENSE INFORMATION

DEA Number: BT5541760
 Business Activity Code: A 0 RETAIL PHARMACY
 DEA Schedules: 22N 33N 4 5
 License Expiration Date: 20121130

CUSTOMER INFORMATION

T AND J ENTERPRISES INC
 DBA THE MEDICINE SHOPPE 2402 ADAMS AVENUE
 HUNTINGTON WV 25704 3044296716 3044296716
 Dominant Accounting Class: INDEPENDENT MEDICINE SHOPPE INDE
 First Cardinal Account Created: 3/19/1996
 Visited by QRA / # of Visits / Most Recent Visit:

PURCHASE PROFILE

The below metrics are aggregated based on the previous 12 months sales figures

# of Drug Families Purchased:	51	Hydrocodone	30,161
Total Rx Sales (\$):	\$2,746,254.27	Oxycodone	259,200
Control Substance (CS) Sales (\$):	\$816,193.93	Alprazolam	98,300
Rx Dosage Units Sold	2,972,822	Phentermine	4,100
CS Dosage Units Sold:	675,748	Carisoprodol	2000
% CS Purchases	22.73%	Tramadol	26250
% AHOP CS Purchases	57.97%		
# of SOM Events (Family)			
Recent SOM Event (Family)			

EARLY DIALOGUE INFORMATION

Drug Family: 9273 DEXTROPROPOXYPHENE NAPSYLATE
 Allocated Accrual: 8,500
 Threshold Limit: 11,000
 % of Limit: 77
 Previous Month Max:
 % Variance (Max):
 No threshold adjustment

HISTORICAL PURCHASE DATA

Aug 09	3,100	Feb 10	3,000
Sep 09	0	Mar 10	-100
Oct 09	3,100	Apr 10	3,100
Nov 09	3,000	May 10	0
Dec 09	3,000	Jun 10	3,100
Jan 10	0	Jul 10	2,500

DISTRACK INFORMATION

Dublin 6 WH
 8 BT5541760 9273

REGIONAL DEMOGRAPHICS

Region: South South Atlantic
 County / Population: WAYNE 45,824
 Population of Zip: 17,019
 Income / Household: \$27,335.00
 Median Age: 38.60

REVIEW CHECKLIST

Customer Profile
 Held Order
 AR Limit
 Shipped Report
 Ordered Report
 Release/Cancel Report
 Validate Order Limits
 Customer Inquiry
 SCI Repository Review
 Contact Customer

QRA DECISION

Increase SOM Limits
 Decrease SOM Limits
 QRA Site Visit
 Sales Site Visit



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9/9/2010 9:08:39 AM

HIGHLY CONFIDENTIAL

CAH_FEDWV_00000550

P-42116_00057

Normal Levels to Adjust

DC	DEA Number	Drug Family	Threshold Limit	Avg Qty Dispensed Per Month	New Threshold
29	AH3258123	9143	18000	14,985	19500
8	AS2806199	9193	11000	10,195	13300
8	AT2986288	9193	38000	31,879	41400
6	BA9778688	9143	23000	23,287	30300
10	BB3384598	9193	30000	24,742	32200
11	BB6106149	5000	5000	4,056	5300
11	BB6106149	9143	30500	26,494	34400
19	BD5812664	5000	7000	6,593	8600
9	BD8492326	9143	12000	10,124	13200
11	BF5223867	9143	31500	24,377	31700
9	BG2265191	1205	1000	912	1190
11	BH7580992	9250	8000	7,303	9500
11	BH9131436	2882	14000	12,491	16200
35	BJ9958868	9143	20000	18,446	24000
16	BL4666345	9193	31500	28,522	37100
11	BM4917285	5000	5500	4,493	5800
8	BM5437226	9143	36000	28,655	37300
16	BM6247806	9193	31500	25,301	32900
11	BN3800035	9143	25000	20,479	26600
43	BP2120703	5000	5000	3,945	5100
16	BP5692909	9193	31500	25,910	33700
8	BT1701146	9143	25000	23,693	30800
28	BT5461924	5000	6000	4,795	6200
8	BT5541760	9143	30500	23,535	30600
18	BT9786041	9193	21000	17,139	22300
19	FC1303990	5000	8500	6,945	9000
19	FC1303990	9143	33000	26,692	34700
43	FJ0635954	2882	7000	5,788	7500
34	FS0418601	9193	28000	23,912	31100
37	FS2211237	2315	100	48	200
37	FS2211237	9801	600	923	1200
Cim customer update threshold. Above is dispensed data....received from CIM.					

Hammond, Tawney

From: "Inquisite Server" [administrator@myserver.com]
Sent: Wednesday, November 24, 2010 4:48 PM
To: GMB-QRA-AD-Thresholds
Subject: Response for HSCS-P Threshold Event

E-mail notification for survey response

Survey Title: HSCS-P Threshold Event

Respondent Unique Key: INQ-20101124153956-674777051 Response Date: Wed, Nov 24, 2010 15:48:10

Page 1

Facility Name:

{Enter text answer}

[The Medicine Shoppe]

Facility Address:

{Enter text answer}

[2402 Adams Ave Huntington, WV]

Facility Contact:

{Enter text answer}

[Joe McGlothlin]

Facility Phone:

{Enter text answer}

[304-429-6716]

Facility Fax No.:

{Enter text answer}

[304-429-1924]

Please outline the underlying factors that are contributing to your need for the increased quantities of the drug family:

{Enter answer in paragraph form}

[Last week we purchased appx 80 bottles of Oxycodone 30mg and 40 bottles of Oxycodone 15mg in anticipation of shortage or allocation. Present inventory in safe. Oxycodone 30mg Mallinckrodt 7653 tabs Oxycodone 15mg Mallinckrodt 5661 tabs We anticipate this lasting us through December 2010. Our volume of this drug has not increased.]

Name of Drug Family held per Regulatory Review:

{Enter text answer}

[Oxycodone]

Facility DEA#:

{Enter text answer}

[BT5541760]

Name of Person Responding:

{Enter text answer}

[Joe McGlothlin]

Howenstein, Kim

From: Howenstein, Kim
Sent: Monday, November 29, 2010 10:04 AM
To: Kave, Jesse
Cc: Emma, Douglas
Subject: RE: [SOMStatus] Notification of New Customer File

Hi Jesse,

I appears everything has been released.

Thanks,

Kim

-----Original Message-----

From: Kave, Jesse
Sent: Wednesday, November 24, 2010 4:43 PM
To: Howenstein, Kim
Subject: FW: [SOMStatus] Notification of New Customer File
Importance: High

Kim,

Joe @ Med Shoppe called today because evidently he is now blocked. Joe had heard of the shortage of oxycodone and been ordering some extra but now he needs Oxycontin and it will not let him order any.

Thanks,
Jesse Kave
Cardinal Health
Pharmacy Business Consultant
jesse.kave@cardinalhealth.com
Cell 304-926-4337

-----Original Message-----

From: Kave, Jesse
Sent: Wednesday, November 24, 2010 4:12 PM
To: MSI 0290
Subject: FW: [SOMStatus] Notification of New Customer File

Joe,

Please see link below and explain your situation with Oxycontin.

Thanks,
Jesse Kave
Cardinal Health
Pharmacy Business Consultant
jesse.kave@cardinalhealth.com
Cell 304-926-4337

Customer must complete the one-page questionnaire.
Questionnaire is available at: <http://www.cardinalhealth.com/thresholdsurvey>

Customer Name: MED SHOPPE #0290 HNTNGTN CSOS
DEA#: BT5541760
Segment: RETAIL INDEPENDENT
Group: MEDICINE SHOPPE INDEPENDENT
Address: 2402 ADAMS AVE HUNTINGTON, WV 25704 Phone Number: 3044296716 Overage Date: Nov 22, 2010
Item Description: ROXICET 5-325MG 500 C2
Family Base Code: OXYCODONE HYDROCHLORIDE (9143) Status Justification:
Justification Comments:

Thanks,
SOM Status System

From: Howenstein, Kim
To: Kave, Jesse
Subject: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760
Date: Wednesday, November 30, 2011 12:54:00 PM

Good Afternoon Jesse,
Hope all is well!

Please work with your customer to obtain dispense data specific to the **Oxymorphone Hydrochloride** family of drugs without patient information and in excel format. The most current 3 months should be sufficient to verify the growth in this drug family. Dispense data is helpful in verifying the growth and adjusting the threshold if appropriate and necessary.

Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance | QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

From: Kave, Jesse
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760
Date: Friday, December 09, 2011 5:32:24 PM

Kim,

I spoke with Joe and I can pick up his report Monday. The reason for the shift is the docs are using Oxymorphone instead of Oxycontin so it should be showing a decrease.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Wednesday, November 30, 2011 12:55 PM
To: Kave, Jesse
Subject: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

Good Afternoon Jesse,
Hope all is well!

Please work with your customer to obtain dispense data specific to the Oxymorphone Hydrochloride family of drugs without patient information and in excel format. The most current 3 months should be sufficient to verify the growth in this drug family. Dispense data is helpful in verifying the growth and adjusting the threshold if appropriate and necessary.

Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance | QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

From: Kave, Jesse
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760
Date: Monday, December 12, 2011 5:17:31 PM
Attachments: BT5541760.xls

Kim,

Here is Joe's report which I put into a spread sheet for you since there weren't very many.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Monday, December 12, 2011 9:11 AM
To: Kave, Jesse
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

Thank you Jesse.

From: Kave, Jesse
Sent: Friday, December 09, 2011 5:32 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

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From: Howenstein, Kim
Sent: Wednesday, November 30, 2011 12:55 PM
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Subject: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

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Hope all is well!

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**Medicine Shoppe #0290
Huntington WV
Acct#77068 & #103089
DEA BT5541760**

9/9/2011 to 12/9/2011

Description	NDC	Qty Disp
Opana 5	63481061270	90
Opana 101	63481067470	1280
Opana 15	63481055370	90
Opana 20	63481061770	1322
Opana 30	63481057170	1462
Opana 40	63481069370	3253
Opana 51	63481090770	90
Opana 75	63481052270	90
Oxym 15	00228326211	150
Oxym 75	00228326111	614
Oxym 51	60951079470	180
Oxym 51	00054028325	210
Opana 10	63481061370	90

From: Emma, Douglas
To: Howenstein, Kim
Subject: FW: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760
Date: Thursday, December 22, 2011 10:59:39 AM
Attachments: BT5541760.xls
TandJ.xlsx

Kim,

Please make the highlighted change

Doug Emma, RPh
Manager Supply Chain Integrity
Quality & Regulatory Affairs
Cardinal Health | 7601 NE Gardner Ave
Kansas City, MO 64120
direct: 816-242-6122 fax: 614-652-4253

From: Howenstein, Kim
Sent: Tuesday, December 13, 2011 8:01 AM
To: Emma, Douglas
Subject: FW: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

Doug,
Please see attached data and my analysis.

Thank you,
Kim

From: Kave, Jesse
Sent: Monday, December 12, 2011 5:17 PM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760

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T AND J ENTERPRISES INC DBA THE MEDICINE SHOPPE - BT5541760 - DC 8

Date Range - 3 Months - 9/9/2011 to 12/9/2011

Base	Quantity	Avg	Limit	Limit-Avg/Avg	Changes
9652	8921	2974	3300	11%	4002

From: Howenstein, Kim
To: Kave, Jesse
Subject: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Thursday, February 09, 2012 4:15:00 PM

Good Afternoon Jesse,

I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.

Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,
Kim

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7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

From: [Kave, Jesse](#)
To: [Howenstein, Kim](#)
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Friday, February 10, 2012 11:23:56 AM

Kim
Can I remove your name and forward to customer?
Jesse

Sent from my iPhone

On Feb 9, 2012, at 4:15 PM, "Howenstein, Kim"
<kim.howenstein@cardinalhealth.com> wrote:

Good Afternoon Jesse,
I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.
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From: Kave, Jesse
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Friday, February 10, 2012 3:56:26 PM

Kim,
Joe has put a request in for 72x100 for pick up of the oxy condone.
Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim"
<kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

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Sent: Friday, February 10, 2012 11:24 AM
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From: Kave, Jesse
To: [Howenstein, Kim](#)
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Friday, February 10, 2012 3:53:58 PM

Kim

Joe said he was trying to get some oxy's do to supply issues so he will have a return of several bottles. He is to let me know how many once he contacts Cust service for a pick up.

Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim"
<kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

From: Kave, Jesse
Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

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Fax: (614) 553-6147

From: Emma, Douglas
To: Howenstein, Kim
Cc: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Tuesday, February 14, 2012 10:14:32 AM

No need for data at the present time. As Jesse indicated he will let us know and I will monitor for MRA's if the account experiences a threshold event.

Doug Emma, RPh
Manager Supply Chain Integrity
Quality & Regulatory Affairs
Cardinal Health | 7601 NE Gardner Ave
Kansas City, MO 64120
direct: 816-242-6122 fax: 614-652-4253

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 9:01 AM
To: Emma, Douglas
Subject: FW: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Doug,
Please see below – Would you like data still?

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,
As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

Thanks,
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Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

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Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

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Sent from my iPhone

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Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

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Kim Howenstein

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Fax: (614) 553-6147

From: Kave, Jesse
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Thursday, February 16, 2012 11:48:07 AM

Kim,

Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.

I appreciate the information.

Kim

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

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Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
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Thank you

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To: Howenstein, Kim
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Kim,
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Sent from my iPhone

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Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

From: Kave, Jesse
To: Howenstein, Kim
Subject: Med Shoppe Huntington WV CSOS #103089
Date: Tuesday, February 21, 2012 10:05:10 AM

Kim,

The MRA for the 72 Oxycontin should be in the system this morning so would please verify it was done and update his opportunity to purchase these items if possible and let me know.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Emma, Douglas
To: Kave, Jesse
Cc: Howenstein, Kim
Subject: FW: Med Shoppe Huntington WV CSOS #103089
Date: Tuesday, February 21, 2012 10:14:07 AM

Jesse

The MRA does appear in the system. As long as orders placed are reasonable they should not experience service issues.

To my knowledge there have been no issues and I will continue to monitor the account throughout the remainder of the month

Doug Emma, RPh
Manager Supply Chain Integrity
Quality & Regulatory Affairs
Cardinal Health | 7601 NE Gardner Ave
Kansas City, MO 64120
direct: 816-242-6122 fax: 614-652-4253

From: Howenstein, Kim
Sent: Tuesday, February 21, 2012 9:09 AM
To: Emma, Douglas
Subject: FW: Med Shoppe Huntington WV CSOS #103089

From: Kave, Jesse
Sent: Tuesday, February 21, 2012 10:05 AM
To: Howenstein, Kim
Subject: Med Shoppe Huntington WV CSOS #103089

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Fax 614-553-9508

From: "Inquisite Server"
To: GMB-QRA-AD-Thresholds
Subject: Response for Pharmaceutical Threshold Event
Date: Tuesday, February 21, 2012 4:45:42 PM

E-mail notification for survey response
Survey Title: Pharmaceutical Threshold Event
Respondent Unique Key: INQ-20120221152616-968883095
Response Date: Tue, Feb 21, 2012 15:45:25

Page 1

Facility Name:
{Enter text answer}
[The Medicine Shoppe]

Facility Address:
{Enter text answer}
[2402 Adams Avenue Huntington, WV 25704]

Facility Contact:
{Enter text answer}
[Joe McGlothlin]

Facility Phone:
{Enter text answer}
[3044296716]

Facility Fax No.:
{Enter text answer}
[3044291924]

Please outline the underlying factors that are contributing to your need for the increased quantities of the drug family:
{Enter answer in paragraph form}
[A competing pharmacy closed last week that filled a majority of these prescriptions for a ADHD (Behavioral Medicine Specialist)Physician. We were already filling prescriptions from this physician but we will be receiving more prescriptions resulting in increased purchases.]

Name of Drug Family held per Regulatory Review:
{Enter text answer}
[Amphetamines and Stimulants for ADHD]

Facility DEA#:
{Enter text answer}
[BT5541760]

Name of Person Responding:
{Enter text answer}
[Joe McGlothlin]

From: Emma, Douglas
To: Kave, Jesse
Cc: Howenstein, Kim
Subject: RE: Med Shoppe Huntington WV CSOS #103089
Date: Tuesday, February 21, 2012 5:33:45 PM

Thank you sir for your continued help assisting QRA

Doug Emma, RPh
Manager Supply Chain Integrity
Quality & Regulatory Affairs
Cardinal Health | 7601 NE Gardner Ave
Kansas City, MO 64120
direct: 816-242-6122 fax: 614-652-4253

From: Kave, Jesse
Sent: Tuesday, February 21, 2012 4:32 PM
To: Emma, Douglas
Cc: Howenstein, Kim
Subject: RE: Med Shoppe Huntington WV CSOS #103089

Doug,

I just had Joe do a Threshold event survey to provide some information on increased usage from an existing doctor in town not related to the current Oxycodone issue so I just wanted you all to know there is one out there to be reviewed.

Thanks,
JESSE KAVE
CARDINAL HEALTH
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Subject: FW: Med Shoppe Huntington WV CSOS #103089

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From: Kave, Jesse
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 6:01:26 PM
Attachments: Picture_728.jpg
Picture_729.jpg
Picture_730.jpg
Picture_731.jpg
Picture_732.jpg
Picture_733.jpg
Picture_734.jpg

Kim,

See attached top doctor's report for Oxycodones.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

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<kim.howenstein@cardinalhealth.com> wrote:

Good Afternoon Jesse,
I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.
Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance | QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

Page: 2

MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
JENNINGS, TUCKER	2			2.94	10.30	\$7.36	71.46	\$3.68
KIM, JEFFERY	1			18.78	24.75	\$5.97	24.12	\$5.97
KIMMEY, GERRIT A	6			3052.00	3218.59	\$166.59	5.18	\$27.77
KURUCZ, JANE A	1			11.90	12.24	\$0.34	2.78	\$0.34
MACFARLAND, DAWN	9			265.21	402.54	\$137.33	34.12	\$15.26
MAIERS, KANE	1			1.10	15.95	\$14.85	93.10	\$14.85
MAJESTRO, TONY	1			1.47	11.69	\$10.22	87.43	\$10.22
FARESI, MARIANO	2			9.78	35.12	\$25.34	72.15	\$12.67
MEADOWS, CHARLES	2			56.34	85.00	\$28.66	33.72	\$14.33
MEMON, REHAN	27			2403.01	2601.09	\$198.08	7.62	\$7.34
MILLER, KIRT	1			1.10	15.95	\$14.85	93.10	\$14.85
MILLER, S	1			1.47	7.93	\$6.46	81.46	\$6.46
MILLER, STEPHEN	2			2.39	13.55	\$11.16	82.36	\$5.58
MITCHELL, SCOTT	1			17.86	20.31	\$2.45	12.06	\$2.45
MORGAN, CRAIG	1			1.10	7.01	\$5.91	84.31	\$5.91
NEGINHAL, VIVEK	1			2.21	16.61	\$14.40	86.69	\$14.40
NUNAN, PATRICK	9			169.64	400.78	\$231.14	57.67	\$25.68
OZTURK, AHMET	119			19641.52	21487.10	\$1,845.58	8.59	\$15.51
PARIKH, JEANNINE	1			21.23	20.59	\$0.64-	3.11-	\$0.64-
PATICK, DAVID L	2			8.84	20.00	\$11.16	55.80	\$5.58
PINSON, CYNTHIA	2			6.63	15.73	\$9.10	57.85	\$4.55
SAVORY, LINDA	5			123.72	310.58	\$186.86	60.16	\$37.37
SAXE, TIMOTHY	3			1714.68	1878.34	\$163.66	8.71	\$54.55
SEHGAL, RAJESH	1			2.03	5.14	\$3.11	60.51	\$3.11
SHARMA, SANJEEV	2			56.34	130.08	\$73.74	56.69	\$36.87
SILBERMINS, DAMIAN	1			1.84	7.69	\$5.85	76.07	\$5.85
SNYDER, RUSSELL	3			128.23	549.85	\$421.62	76.68	\$140.54
TACKETT, EVA	1			31.85	42.50	\$10.65	25.06	\$10.65

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

Page: 3

MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
THORARINSSON, BJORN	1	2.21	13.50	\$11.29	83.63	\$11.29
TOWER, MARK	1	76.06	54.45	\$21.61-	39.69-	\$21.61-
TSAI, PETER	1	28.85	46.42	\$17.57	37.85	\$17.57
TURNER, ROBERT E	1	1.10	5.63	\$4.53	80.46	\$4.53
TWILLIE, TWYLA	2	80.02	150.45	\$70.43	46.81	\$35.22
WALLACE, JANET	3	104.87	150.26	\$45.39	30.21	\$15.13
WEBB, DELENO H	313	43178.84	51391.71	\$8,212.87	15.98	\$26.24
WERTHAMMER, MATTHEW	1	3.31	24.49	\$21.18	86.48	\$21.18
WHITMORE, DAVID J	1	37.56	50.15	\$12.59	25.10	\$12.59
TOTAL PRESCRIPTIONS	582	73726.98	86483.58	\$12,756.60	14.75	\$21.92

TOTAL RECORDS LISTED -- 65

SELECTION CRITERIA Tx Date Range 11/24/2011 02/24/2012
 Physician Code
 Physician Group
 Physician Type
 T/P Carrier
 T/P Plan
 List Each Tx: N Summary Only: N New/Refill:

Drug Code	Starting	Ending	StorageCell	Starting	Ending
NDC/DIN	OXYC1	OXYI5	Pack Size		
Drug STD			STD Pack		
SUBS Code			Drug Unit		
GPI			Schedule		
Gen Name			Canada Sched		
			Orig Sched		
TallMan Nm			DESI		
			Drug Group		
Carrier			Sub Group		
T/P Plan			Category		
T/P Group			Multi		
Drug Lot#			TherClass		
Manufact.			Ther Equiv		
Item #					

Warehouse	Reportable	Status	UPC
Injectable	Written	StoreGen	Disp Sys

Oxycodone ALL strengths

Name: WEBB, DELENO H

WEBB

, DELENO

H

Comment:>20040923 CALL 1-800-599-878*0 FOR PATIENT REFILLS

Address: 10 6TH AVENUE WEST SUITE 300

Address:

Group:

City,ST: HUNTINGTON

, WV

Probate:

ZipCode: 25701

DAW:

Phone #: (304)525-9355,

Degree:

Fax #: (304)522-0835,

Specialty:

DEA #: AW4345167

Last: 02/27/2012

DEA Suf:

NPI #: 1942373923

ST/PV #: 9111115

T/P #:

Doctor:

Code: MEM01
Name: MEMON, REHAN
MEMON, REHAN
Comment: 1053433938=NPI DIRECT LINE *526-2177
Address: 1623 13TH AVE
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25701
Phone #: (304)526-2243,
Fax #: (304)526-2174,
DEA #: FM1057492
DEA Suf:
NPI #: 1053433938
ST/PV #: 9111115
T/P #: FM1057492
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Code: OZTTAH1
Name: OZTURK, AHMET
OZTURK, AHMET
Comment: >DIRECT LINE 526-2177 * REFILL LINE 781-0204
Address: 1623 13TH AVE
Address:
City, ST: HUNTINGTON, WV
ZipCode: 25701 0000
Phone #: 526-2243,
Fax #: 526-2174,
DEA #: BO1101512
DEA Suf:
NPI #: 1942206529
ST/PV #: 9111115
T/P #:
Doctor:
Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

COCOA: NUNAN
Name: NUNAN, PATRICK
NUNAN

AC
, PATRICK

#Rx: 8
\$Rx: \$365.22

Comment:
Address: 1102 POPLAR STR
Address:
City,ST: KENOVA , WV
ZipCode: 25530
Phone #: (304)453-5458,
Fax #: (304)453-5459,
DEA #: BN0137768
DEA Suf:
NPI #: 1780648345
ST/PV #:
T/P #:
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/22/2012

Code: MACF7DA1
Name: MACFARLAND, DAWN
MACFARLAND

, DAWN

Comment:

Address: 2674 5TH AVE, SUITE 2

Address:

City,ST: HUNTINGTON

, WV

ZipCode: 25702

Phone #: (304) 523-5555,

Fax #: 523-2220,

DEA #: BM6315469

DEA Suf:

NPI #: 1881623155

ST/PV #:

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

From: Kave, Jesse
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 5:52:29 PM
Attachments: Picture 722.jpg
Picture 723.jpg
Picture 724.jpg
Picture 725.jpg
Picture 726.jpg
Picture 727.jpg

Kim,
See top doctors for Oxymorphone !

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,
Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.
I appreciate the information.

Kim

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim" <kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

From: Kave, Jesse
Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim

Can I remove your name and forward to customer?

Jesse

Sent from my iPhone

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Kim

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Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

Physician Name		# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient		Filled
MEADOWS, CHARLES	3		2043.53	2156.50	\$112.97	5.24	\$37.66
MEMON, REHAN	5		1143.97	1207.43	\$63.46	5.26	\$12.69
OZTURK, AHMET	12		3012.86	3153.02	\$140.16	4.45	\$11.68
WEBB, DELENO H	92		48971.23	52382.50	\$3,411.27	6.51	\$37.08
TOTAL PRESCRIPTIONS	112		55171.59	58899.45	\$3,727.86	6.33	\$33.28

TOTAL RECORDS LISTED -- 4

SELECTION CRITERIA

Tx Date Range

11/24/2011

02/24/2012

Physician Code

Physician Group

Physician Type

T/P Carrier

T/P Plan

List Each Tx: N Summary Only: N New/Refill:

Starting

Ending

Starting

Ending

Drug Code

NDC/DIN

Drug STD

SUBS Code

GPI

Gen Name

TallMan Nm

Carrier

T/P Plan

T/P Group

Drug Lot#

Manufact.

Item #

OPAN10

OPAN75

StorageCell

Pack Size

STD Pack

Drug Unit

Schedule

Canada Sched

Orig Sched

DESI

Drug Group

Sub Group

Category

Multi

TherClass

Ther Equiv

Warehouse

Injectable

Reportable

Written

Status

StoreGen

UPC

Disp Sys

Opana brand

Physician Name		# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient		Filled
MEMON, REHAN	6		685.93	730.92	\$44.99	6.16	\$7.50
OZTURK, AHMET	16		2645.09	2974.95	\$329.86	11.09	\$20.62
WEBB, DELENO H	1		456.30	453.23	\$3.07-	0.68-	\$3.07-
TOTAL PRESCRIPTIONS	23		3787.32	4159.10	\$371.78	8.94	\$16.16

TOTAL RECORDS LISTED -- 3

SELECTION CRITERIA

Tx Date Range
Physician Code
Physician Group
Physician Type
T/P Carrier
T/P Plan
List Each Tx: N

11/24/2011

Summary Only: N

02/24/2012

New/Refill:

Drug Code
NDC/DIN
Drug STD
SUBS Code
GPI
Gen Name
TallMan Nm
Carrier
T/P Plan
T/P Group
Drug Lot#
Manufact.
Item #

Starting
OXYM10

Ending
OXYM75

StorageCell
Pack Size
STD Pack
Drug Unit
Schedule
Canada Sched
Orig Sched
DESI
Drug Group
Sub Group
Category
Multi
TherClass
Ther Equiv

Starting
Ending

Warehouse

Reportable

Status

UPC

Injectable

Written

StoreGen

Disp Sys

Opana generic

Code: OZTUHJ
Name: OZTURK, AHMET

#Px: 412

SPX:

545896

OZTURK

, AHMET

Comment: >DIRECT LINE 526-2177

* REFILL LINE 781-0204

Address: 1623 13TH AVE

Address:

City, ST: HUNTINGTON

, WV

Group:

Probate:

ZipCode: 25701 0000

DAW:

Phone #: 526-2243,

Degree:

Fax #: 526-2174,

Specialty:

DEA #: B01101512

Last: 02/27/2012

DEA Suf:

NPI #: 1942206529

ST/PV #: 9111115

T/P #:

Doctor:

Code: MEMO1
Name: MEMON, REHAN
MEMON, REHAN
Comment: 1053433938=NPI DIRECT LINE *526-2177
Address: 1623 13TH AVE
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25701
Phone #: (304)526-2243,
Fax #: (304)526-2174,
DEA #: FM1057492
DEA Suf:
NPI #: 1053433938
ST/PV #: 9111115
T/P #: FM1057492
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Code: WEBBD1

Name: WEBB, DELENO H

#BX: 553

\$BX: \$72355-84

Case 3:17-cv-01362 Document 1516-19 Filed 01/13/22 Page 103 of 180 PageID #: 77949

WEBB

, DELENO

H

Comment:>20040923 CALL 1-800-599-878*0 FOR PATIENT REFILLS

Address: 10 6TH AVENUE WEST SUITE 300

Address:

City,ST: HUNTINGTON

, WV

ZipCode: 25701

Phone #: (304)525-9355,

Fax #: (304)522-0835,

DEA #: AW4345167

DEA Suf:

NPI #: 1942373923

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Code: MEADCH1
Name: MEADOWS, CHARLES

MEADOWS, CHARLES

Comment:

Address: 1600 MEDICAL CENTER DRIVE

Address:

City, ST: HUNTINGTON, WV

ZipCode: 25701

Phone #: (304) 691-1788, (304) 691-1000

Fax #: (304) 691-1694,

DEA #: BM7311498

DEA Suf:

NPI #: 1750346318

ST/PV #:

T/P #:

Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/24/2012

From: [Kave, Jesse](#)
To: [Howenstein, Kim](#)
Cc: [Farrell, Daniel \(PD\)](#)
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 6:23:19 PM
Attachments: [Picture 735.jpg](#)
[Picture 736.jpg](#)
[Picture 737.jpg](#)
[Picture 738.jpg](#)
[Picture 739.jpg](#)
[Picture 740.jpg](#)
[Picture 741.jpg](#)
[Picture 742.jpg](#)
[Picture 743.jpg](#)
[Picture 744.jpg](#)
[Picture 745.jpg](#)
[Picture 746.jpg](#)
[Picture 747.jpg](#)
[Picture 748.jpg](#)
[Picture 749.jpg](#)

Kim,
See attached top doctor report for Hydrocodones.

Thanks,
JESSE KAVE
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Fax 614-553-9508

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Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance | QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

Code: BROW01
Name: BROWNFIELD, RON
BROWNFIELD, RON
Comment: 528-4600 EXT 4510 JULIE *
Address: 5170 US RT 60 EAST
Address:
City, ST: HUNTINGTON, WV
ZipCode: 25705
Phone #: (304) 528-4628, (304) 528-4600
Fax #: 399-2394,
DEA #: BB0457639
DEA Suf:
NPI #: 1730125766
ST/PV #: 9111115
T/P #:
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty: DO
Last: 02/27/2012

Code: OZTURK
Name: OZTURK, AHMET
OZTURK

, AHMET

Comment: >DIRECT LINE 526-2177

* REFILL LINE 781-0204

Address: 1623 13TH AVE

Address:

City, ST: HUNTINGTON

, WV

ZipCode: 25701 0000

Phone #: 526-2243,

Fax #: 526-2174,

DEA #: B01101512

DEA Suf:

NPI #: 1942206529

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Name: CARAWAY, DAVID L

CARAWAY

, DAVID

L

Comment: >KATHY CLAGG # 526-8384

*KATHY CLAGG PAGER 560-1644

Address: 2900 1ST AVE

Address:

City, ST: HUNTINGTON

, WV

ZipCode: 25702 0000

Phone #: (304) 525-7246,

Fax #: (304) 526-1951,

DEA #: BC7126142

DEA Suf:

NPI #: 1245265206

ST/PV #:

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Code: PAT1DA1

Name: PATICK, DAVID L
PATICK

, DAVID

L

Comment:

Address: 5170 US ROUTE 60 EAST

Address:

City, ST: HUNTINGTON

, WV

ZipCode: 25705

Phone #: (304) 528-4637,

Fax #: (304) 399-2383,

DEA #: AP1641085

DEA Suf:

NPI #: 1972546273

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/24/2012

Code: TACKCH1
Name: TACKETT, CHANDOS DEWAYNE
TACKETT, CHANDOS DEWAYNE
Comment: EXT.4527/SHIRLEY FAX528-46*73
Address: 5170 US ROUTE 60 EAST
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25705
Phone #: 528-4663, (304) 528-4527
Fax #: (304) 528-4624,
DEA #: BT3664504
DEA Suf:
NPI #: 1912933151
ST/PV #:
T/P #:
Doctor:
Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Stop #: 0290

PDX Inc. PDX PHARMACY SYSTEM

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MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
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Rx Num	QTY	Drug Name	Cost	Retail	Patient	Filled
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Drug Code	Starting	Ending	StorageCell	Starting	Ending
NDC/DIN	HYDR105D1	HYDR105D1	Pack Size		
Drug STD			STD Pack		
SUBS Code			Drug Unit		
GPI			Schedule		
Gen Name			Canada Sched		
			Orig Sched		
TallMan Nm			DESI		
			Drug Group		
Carrier			Sub Group		
T/P Plan			Category		
T/P Group			Multi		
Drug Lot#			TherClass		
Manufact.			Ther Equiv		
Item #					

Hydrocodone 10/500

Warehouse	Reportable	Status	UPC
Injectable	Written	StoreGen	Disp Sys

Shelf Life	Starting	Ending	Starting	Ending	UnitofUse
Disp. Life					UnitDose
Drug Exp.					AutoFill
DC Date					AWPSrc
Mfr DC					ACQSrc
MAC Date					
AWP Date					
Vendor					
MTD Usage					
YTD Usage					
Intr					
Coun					
Allergy					
Default Daw					
MAC Price					
AWP Price					
On-Hand					
PrcLst Qty1					
PrcLst Qty2					

ACQ Pcnt
STD Pcnt
REG Pcnt
WEL Pcnt
INV Cost
Price Cd
Reorder
Comp Flag All Drugs
Bubble Fee ALL
Use / Print
CentralFill ANY
Mail Only ANY
No Mail Order
Refrigerate
Signtr Reqd
HAZMAT
Bay
Rack
AltGrp/Class

Shelf Bin

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		ADAMS, JIMMY	1	5.57	10.31	\$4.74	45.97	\$4.74
		AHMAD, IJAZ	3	31.35	89.84	\$58.49	65.10	\$19.50
		ALLAN, BENJAMIN	6	39.18	132.15	\$92.97	70.35	\$15.50
		BARRINGER, ERICA D	3	23.49	74.85	\$51.36	68.62	\$17.12
		BROWNFIELD, RON	31	354.78	827.36	\$472.58	57.12	\$15.24
		CARAWAY, DAVID L	22	150.69	287.69	\$137.00	47.62	\$6.23
		CARICO, GREG	3	37.15	52.02	\$14.87	28.59	\$4.96
		CHANEY, GREGORY D	3	13.05	30.50	\$17.45	57.21	\$5.82
		CHONGSWATDI, NATAVOOT	3	37.15	57.30	\$20.15	35.17	\$6.72
		CLARKE, GREGORY	1	1.74	7.60	\$5.86	77.11	\$5.86
		COFFMAN, SHAWN W	2	10.44	34.28	\$23.84	69.54	\$11.92
		COPLEY, MARY SANDRA	3	15.66	36.60	\$20.94	57.21	\$6.98
		CREMEANS, GARY	6	62.70	199.87	\$137.17	68.63	\$22.86
		GOEBEL, LYNNE	2	20.90	35.08	\$14.18	40.42	\$7.09
		HARPER, GLENN	3	31.35	80.95	\$49.60	61.27	\$16.53
		HARRIS, MATTHEW	1	7.83	18.52	\$10.69	57.72	\$10.69
		HEGG, KYLE	3	13.22	28.22	\$15.00	53.15	\$5.00
		JARRELL, EUGENIA	5	46.13	76.23	\$30.10	39.49	\$6.02
		KLINESTIVER, DON	4	20.88	48.80	\$27.92	57.21	\$6.98
		MACFARLAND, DAWN	2	15.66	36.02	\$20.36	56.52	\$10.18
		MARCUM, PATTI	9	70.50	200.55	\$130.05	64.85	\$14.45
		MEADOWS, CHARLES	3	31.35	82.20	\$50.85	61.86	\$16.95
		MEMON, REHAN	4	25.87	46.42	\$20.55	44.27	\$5.14
		MOSES, MELIN	2	10.44	21.51	\$11.07	51.46	\$5.54
		MOZAFFARI, FARID	1	3.48	6.73	\$3.25	48.29	\$3.25
		NELSON, JOSEPH M	4	6.10	24.24	\$18.14	74.83	\$4.54
		OZTURK, AHMET	30	140.65	318.69	\$178.04	55.87	\$5.93
		PARIKH, JEANNINE	1	15.67	35.70	\$20.03	56.11	\$20.03

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		PATICK, DAVID L	14	133.56	380.27	\$246.71	64.88	\$17.62
		RELLAN, DEV R	3	15.66	33.85	\$18.19	53.74	\$6.06
		RICHARDSON, BRAD	6	34.22	62.42	\$28.20	45.18	\$4.70
		SABER, KATHY	3	23.49	53.58	\$30.09	56.16	\$10.03
		SAXE, TIMOTHY	3	31.35	80.95	\$49.60	61.27	\$16.53
		SEHGAL, RAJESH	1	2.61	8.29	\$5.68	68.52	\$5.68
		SIEGEL, SCOTT A	2	10.44	30.00	\$19.56	65.20	\$9.78
		SNYDER, RUSSELL	1	5.22	50.36	\$45.14	89.63	\$45.14
		SPURLOCK, ELIZABETH	7	42.34	87.10	\$44.76	51.39	\$6.39
		STULTZ, DEBRA	4	23.78	74.55	\$50.77	68.10	\$12.69
		TACKETT, CHANDOS DEWAYN	3	31.92	68.58	\$36.66	53.46	\$12.22
		TICE, DOUGLAS	2	6.96	13.90	\$6.94	49.93	\$3.47
		TRIPLETT, TERRENCE	2	15.66	91.90	\$76.24	82.96	\$38.12
		TURNER, ROBERT E	7	71.09	163.04	\$91.95	56.40	\$13.14
		VIRGIN, TONY	2	10.44	20.00	\$9.56	47.80	\$4.78
		WALLACE, JANET	10	112.60	213.32	\$100.72	47.22	\$10.07
		WHITMORE, DAVID J	5	45.85	88.92	\$43.07	48.44	\$8.61
		WOODS-684, DANIEL	1	10.45	17.84	\$7.39	41.42	\$7.39
TOTAL PRESCRIPTIONS			237	1870.62	4439.10	\$2,568.48	57.86	\$10.84

TOTAL RECORDS LISTED -- 46

SELECTION CRITERIA

Tx Date Range
Physician Code
Physician Group
Physician Type
T/P Carrier
T/P Plan
List Each Tx: N

11/24/2011

Summary Only: N

02/24/2012

New/Refill:

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient	Filled

SELECTION CRITERIA

Tx Date Range

11/24/2011

02/24/2012

Physician Code

Physician Group

Physician Type

T/P Carrier

T/P Plan

List Each Tx: N Summary Only: N New/Refill:

Starting	Ending		Starting	Ending
Drug Code	HYDR550D1	HYDR550D1	StorageCell	
NDC/DIN			Pack Size	
Drug STD			STD Pack	
SUBS Code			Drug Unit	
GPI			Schedule	
Gen Name			Canada Sched	
			Orig Sched	
TallMan Nm			DESI	
			Drug Group	
Carrier			Sub Group	
T/P Plan			Category	
T/P Group			Multi	
Drug Lot#			TherClass	
Manufact.			Ther Equiv	
Item #				

Hydrocodone 5/500

Warehouse	Reportable	Status	UPC	
Injectable	Written	StoreGen	Disp Sys	
	Starting	Ending	Starting	Ending
Shelf Life			ACQ Pcnt	UnitofUse
Disp. Life			STD Pcnt	UnitDose
Drug Exp.			REG Pcnt	AutoFill
DC Date			WEL Pcnt	AWPSrc
Mfr DC			INV Cost	ACQSrc
MAC Date			Price Cd	
AWP Date			Reorder	
Vendor			Comp Flag	All Drugs
MTD Usage			Bubble Fee	ALL
YTD Usage			Use / Print	
Intr			CentralFill	ANY
Coun			Mail Only	ANY
Allergy			No Mail Order	
Default Daw			Refrigerate	
MAC Price			Signtr Reqd	
AWP Price			HAZMAT	
On-Hand			Bay	Shelf
PrcLst Qty1			Rack	Bin
PrcLst Qty2			AltGrp/Class	

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		ABDELGABER, AHMED	2	11.29	29.96	\$18.67	62.32	\$9.34
		AHMAD, IJAZ	1	1.11	5.00	\$3.89	77.80	\$3.89
		BLACK, MICHAEL	1	2.23	8.11	\$5.88	72.50	\$5.88
		BOLANO, LUIS	5	5.01	33.89	\$28.88	85.22	\$5.78
		BOOTH, RICHARD	2	1.85	13.35	\$11.50	86.14	\$5.75
		BOWEN, CRAIG DDS	2	1.48	12.66	\$11.18	88.31	\$5.59
		BROWN, KEVIN	1	1.86	5.97	\$4.11	68.84	\$4.11
		BROWNFIELD, RON	11	47.92	210.63	\$162.71	77.25	\$14.79
		CARAWAY, DAVID L	9	24.96	165.09	\$140.13	84.88	\$15.57
		CASTLE, JASON	1	2.28	5.99	\$3.71	61.94	\$3.71
		DEL CHECCOLO, RICHARD	2	1.88	10.45	\$8.57	82.01	\$4.29
		CLARKE, GREGORY	1	0.74	18.95	\$18.21	96.09	\$18.21
		CREMEANS, GARY	2	4.46	15.00	\$10.54	70.27	\$5.27
		EAKLE, LINDA	3	6.69	23.72	\$17.03	71.80	\$5.68
		GYAMFI, RICHMOND	1	0.56	13.95	\$13.39	95.99	\$13.39
		HADDOX, JOSHUA	1	0.30	10.95	\$10.65	97.26	\$10.65
		HARPER, GLENN	6	26.76	192.48	\$165.72	86.10	\$27.62
		HARRISON JR., CURTIS	1	2.08	40.95	\$38.87	94.92	\$38.87
		HARRIS, ERIKA	3	11.13	69.99	\$58.86	84.10	\$19.62
		HATTAB, YOUSEF	2	8.92	34.92	\$26.00	74.46	\$13.00
		HEGG, KYLE	2	2.30	12.87	\$10.57	82.13	\$5.29
		HENSON, DOUGLAS	2	4.83	54.68	\$49.85	91.17	\$24.93
		IGNATIADIS, PANOS	3	11.80	67.35	\$55.55	82.48	\$18.52
		JARRELL, EUGENIA	3	8.98	24.38	\$15.40	63.17	\$5.13
		KILKENNY, MICHAEL	2	8.92	22.04	\$13.12	59.53	\$6.56
		KILKENNY, MICHAEL E	1	4.46	11.02	\$6.56	59.53	\$6.56
		KLINESTIVER, DON	3	10.02	30.75	\$20.73	67.41	\$6.91
		LEWIS, MYRON	8	32.54	340.48	\$307.94	90.44	\$38.49

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

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MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
LOCHOW, STEVEN	1			2.28	21.97	\$19.69	89.62	\$19.69
MADERO, GUILLERMO	1			4.46	17.46	\$13.00	74.46	\$13.00
MAYS-197, ADRIENNE	2			8.92	34.92	\$26.00	74.46	\$13.00
MEMON, REHAN	2			6.24	25.52	\$19.28	75.55	\$9.64
MOORE O.D., GREG	1			0.37	2.17	\$1.80	82.95	\$1.80
MORABITO, ROCCO	2			2.04	19.07	\$17.03	89.30	\$8.52
MORGAN, CRAIG	2			1.85	12.01	\$10.16	84.60	\$5.08
NELSON, JOSEPH M	2			1.01	5.82	\$4.81	82.65	\$2.41
NOVOTNY, STEVEN	1			2.28	8.87	\$6.59	74.30	\$6.59
OPIMO, REGINALD S	1			1.14	5.45	\$4.31	79.08	\$4.31
OZTURK, AHMET	18			50.59	172.27	\$121.68	70.63	\$6.76
PATICK, DAVID L	4			14.48	73.73	\$59.25	80.36	\$14.81
PATTERSON, C. LYNN	3			6.69	25.80	\$19.11	74.07	\$6.37
PINSON, CYNTHIA	1			1.11	5.00	\$3.89	77.80	\$3.89
SAVORY, LINDA	3			3.33	39.99	\$36.66	91.67	\$12.22
TACKETT, CHANDOS DEWAYN	8			28.96	134.84	\$105.88	78.52	\$13.24
TAO, STANLEY	1			2.23	21.45	\$19.22	89.60	\$19.22
TICE, DOUGLAS	1			2.52	9.04	\$6.52	72.12	\$6.52
TURNER, ROBERT E	8			9.48	49.56	\$40.08	80.87	\$5.01
WERTHAMMER, MATTHEW	2			4.46	42.90	\$38.44	89.60	\$19.22
WHITMORE, DAVID J	3			6.69	25.80	\$19.11	74.07	\$6.37
YOUNG, ALLEN	3			7.87	18.24	\$10.37	56.85	\$3.46
TOTAL PRESCRIPTIONS	151			416.36	2257.46	\$1,841.10	81.56	\$12.19

TOTAL RECORDS LISTED -- 50

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

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MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
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Rx Num	QTY	Drug Name	Cost	Retail	Patient	Filled
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SELECTION CRITERIA Tx Date Range 11/24/2011 02/24/2012
 Physician Code
 Physician Group
 Physician Type
 T/P Carrier
 T/P Plan
 List Each Tx: N Summary Only: N New/Refill:

Drug Code	Starting	Ending	StorageCell	Starting	Ending
NDC/DIN	HYDR755D1	HYDR755D1	Pack Size		
Drug STD			STD Pack		
SUBS Code			Drug Unit		
GPI			Schedule		
Gen Name			Canada Sched		
			Orig Sched		
TallMan Nm			DESI		
			Drug Group		
Carrier			Sub Group		
T/P Plan			Category		
T/P Group			Multi		
Drug Lot#			TherClass		
Manufact.			Ther Equiv		
Item #					

Hydrocodone 7.5/500

Warehouse	Reportable	Status	UPC
Injectable	Written	StoreGen	Disp Sys

Starting	Ending	Starting	Ending	UnitofUse
Shelf Life		ACQ Pcnt		UnitDose
Disp. Life		STD Pcnt		AutoFill
Drug Exp.		REG Pcnt		AWPSrc
DC Date		WEL Pcnt		ACQSrc
Mfr DC		INV Cost		
MAC Date		Price Cd		
AWP Date		Reorder		
Vendor		Comp Flag	All Drugs	
MTD Usage		Bubble Fee	ALL	
YTD Usage		Use / Print		
Intr		CentralFill	ANY	
Coun		Mail Only	ANY	
Allergy		No Mail Order		
Default Daw		Refrigerate		
MAC Price		Signtr Reqd		
AWP Price		HAZMAT		
On-Hand		Bay	Shelf	
PrcLst Qty1		Rack	Bin	
PrcLst Qty2		AltGrp/Class		

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		ABDELGABER, AHMED	2	6.84	15.88	\$9.04	56.93	\$4.52
		ADAMS, JIMMY	3	9.57	22.38	\$12.81	57.24	\$4.27
		ALBERICO, ANTHONY	1	0.46	1.89	\$1.43	75.66	\$1.43
		BARRINGER, ERICA D	1	3.42	5.68	\$2.26	39.79	\$2.26
		BARYUN, ESAM	2	6.84	11.36	\$4.52	39.79	\$2.26
		BELL, NAAMAN	2	1.24	8.73	\$7.49	85.80	\$3.75
		BOROWSKI, GREG	1	0.76	11.95	\$11.19	93.64	\$11.19
		BREINIG, ADAM	1	2.28	6.30	\$4.02	63.81	\$4.02
		BROWNFIELD, RON	24	89.68	291.66	\$201.98	69.25	\$8.42
		CARICO, GREG	5	17.67	40.58	\$22.91	56.46	\$4.58
		CHANEY, GREGORY D	1	3.42	8.19	\$4.77	58.24	\$4.77
		CHAPMAN, BRYAN	1	0.57	3.68	\$3.11	84.51	\$3.11
		CHARLES, MITCH	2	0.92	7.23	\$6.31	87.28	\$3.16
		DEL CHECCOLO, RICHARD	3	6.84	12.12	\$5.28	43.56	\$1.76
		CLARKE, GREGORY	1	0.57	10.95	\$10.38	94.79	\$10.38
		COFFMAN, SHAWN W	1	0.76	3.50	\$2.74	78.29	\$2.74
		COLE, JACQUELINE	1	0.38	2.32	\$1.94	83.62	\$1.94
		CREMEANS, GARY	4	4.76	25.92	\$21.16	81.64	\$5.29
		CROCKETT, G ROLAND	1	0.61	3.08	\$2.47	80.19	\$2.47
		DALY, TIMOTHY	1	0.57	3.25	\$2.68	82.46	\$2.68
		DANNALS, TOM	7	29.87	70.62	\$40.75	57.70	\$5.82
		DARLINGTON, JAMES S	2	1.33	7.48	\$6.15	82.22	\$3.08
		DENNISON, WILLIAM B	1	1.14	10.00	\$8.86	88.60	\$8.86
		DENT, MISHA PA-C	1	0.57	2.32	\$1.75	75.43	\$1.75
		DIAL, LARRY	9	34.20	84.14	\$49.94	59.35	\$5.55
		FRANCKE, DAVID	2	6.84	17.90	\$11.06	61.79	\$5.53
		FULLER, JEREMY	1	0.46	5.00	\$4.54	90.80	\$4.54
		GOEBEL, LYNNE	1	9.12	12.56	\$3.44	27.39	\$3.44

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

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MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		GRIMES, MICHAEL	1	0.76	5.94	\$5.18	87.21	\$5.18
		HALE PA-C, KRISTA	2	0.95	7.94	\$6.99	88.04	\$3.50
		HALE, KRISTA	1	0.38	2.45	\$2.07	84.49	\$2.07
		HARPER, GLENN	3	10.85	86.85	\$76.00	87.51	\$25.33
		HEABERLIN, BRIAN	1	1.52	4.53	\$3.01	66.45	\$3.01
		HENGER, LUCAS	1	0.57	10.95	\$10.38	94.79	\$10.38
		HINCHMAN, DAVID	1	0.61	2.04	\$1.43	70.10	\$1.43
		HOLMES, ALLEN	1	1.14	15.00	\$13.86	92.40	\$13.86
		HOLMES, GREG	7	11.23	29.69	\$18.46	62.18	\$2.64
		HOWERTON, STEPHEN	6	3.60	44.13	\$40.53	91.84	\$6.76
		HUTCHISON, LARRY	1	0.57	10.95	\$10.38	94.79	\$10.38
		JOSEPH, PUSHPA NAMBI	2	2.28	9.27	\$6.99	75.40	\$3.50
		KIMMEY, GERRIT A	3	3.62	18.78	\$15.16	80.72	\$5.05
		KOESTER, ALAN	1	0.76	2.00	\$1.24	62.00	\$1.24
		KURUCZ, JANE A	1	3.74	5.81	\$2.07	35.63	\$2.07
		LAVENDER-682, C	2	4.56	17.63	\$13.07	74.13	\$6.54
		LEE, PAUL	1	1.52	4.65	\$3.13	67.31	\$3.13
		LIPSON, WAYNE	1	0.76	10.41	\$9.65	92.70	\$9.65
		MACFARLAND, DAWN	1	3.42	8.59	\$5.17	60.19	\$5.17
		MARCUM, PATTI	6	14.27	49.09	\$34.82	70.93	\$5.80
		MCCANN, KEVIN	2	9.12	22.52	\$13.40	59.50	\$6.70
		MCCORMICK, JEFF	2	3.42	7.94	\$4.52	56.93	\$2.26
		MCKINNEY, SHAWN	1	1.59	6.50	\$4.91	75.54	\$4.91
		MEMON, REHAN	2	3.27	11.74	\$8.47	72.15	\$4.24
		MERKEL, STEVEN	2	4.56	12.53	\$7.97	63.61	\$3.99
		MOZAFFARI, FARID	1	1.52	4.65	\$3.13	67.31	\$3.13
		MURPHY, R SCOTT	1	0.89	5.94	\$5.05	85.02	\$5.05
		NAIR, DILIP	2	1.52	7.20	\$5.68	78.89	\$2.84

Store #: 0290

PDX Inc. PDX PHARMACY SYSTEM

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MEDICINE SHOPPE #0290

11/24/2011-02/24/2012

02/27/2012

UTILIZATION BY PHYSICIAN

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		NEGINHAL, VIVEK	4	7.22	22.19	\$14.97	67.46	\$3.74
		NELSON, JOSEPH M	2	1.14	21.90	\$20.76	94.79	\$10.38
		NUNAN, PATRICK	1	2.67	6.23	\$3.56	57.14	\$3.56
		OAKLEY, GERARD	1	1.52	4.42	\$2.90	65.61	\$2.90
		OSBORN, BRETT	2	4.56	16.48	\$11.92	72.33	\$5.96
		OZTURK, AHMET	15	33.51	161.27	\$127.76	79.22	\$8.52
		PATICK, DAVID L	4	27.36	70.10	\$42.74	60.97	\$10.69
		PHAM, PHUONG	1	1.52	21.95	\$20.43	93.08	\$20.43
		RORRER, CLYDE	1	0.57	1.99	\$1.42	71.36	\$1.42
		SABER, KATHY	2	4.56	56.95	\$52.39	91.99	\$26.20
		SAVORY, LINDA	3	10.26	65.67	\$55.41	84.38	\$18.47
		SAXE, TIMOTHY	1	3.42	6.10	\$2.68	43.93	\$2.68
		SEHGAL, RAJESH	1	0.38	3.02	\$2.64	87.42	\$2.64
		SILBERMINS, DAMIAN	1	0.80	5.98	\$5.18	86.62	\$5.18
		SNYDER, RUSSELL	2	4.56	11.74	\$7.18	61.16	\$3.59
		STEEL, JACK	1	1.14	2.38	\$1.24	52.10	\$1.24
		TETTEH, SHIRLEY	1	4.56	8.17	\$3.61	44.19	\$3.61
		TICE, DOUGLAS	1	1.52	6.59	\$5.07	76.93	\$5.07
		TURNER, ROBERT E	6	7.04	20.94	\$13.90	66.38	\$2.32
		TZYSTUCK, FRED	1	0.38	8.95	\$8.57	95.75	\$8.57
		WALLACE, JANET	5	5.13	24.56	\$19.43	79.11	\$3.89
		WERTHAMMER, MATTHEW	1	1.52	7.94	\$6.42	80.86	\$6.42
TOTAL PRESCRIPTIONS			195	460.03	1687.91	\$1,227.88	72.75	\$6.30

TOTAL RECORDS LISTED -- 78

From: Kave, Jesse
To: Howenstein, Kim
Cc: Farrell, Daniel (PD)
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 5:45:25 PM
Attachments: [Picture 711.jpg](#)
[Picture 712.jpg](#)
[Picture 713.jpg](#)
[Picture 714.jpg](#)
[Picture 715.jpg](#)
[Picture 716.jpg](#)
[Picture 717.jpg](#)
[Picture 718.jpg](#)
[Picture 719.jpg](#)
[Picture 720.jpg](#)
[Picture 721.jpg](#)

Kim,

Please see attached report for T&J for all controls report plus Top doctors report to follow in next email. Excel format not available.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.

I appreciate the information.

Kim

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim" <kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

From: Kave, Jesse
Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim

Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim

Can I remove your name and forward to customer?

Jesse

Sent from my iPhone

On Feb 9, 2012, at 4:15 PM, "Howenstein, Kim"

<kim.howenstein@cardinalhealth.com> wrote:

Good Afternoon Jesse,

I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.

Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,

Kim

Kim Howenstein

Specialist, Quality Assurance | QRA

7000 Cardinal Place

Dublin, OH 43017

Phone: (614) 757-5524

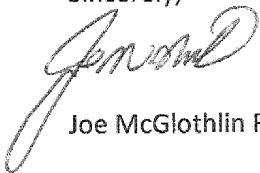
Fax: (614) 553-6147

Kim Howenstein,

The Medicine Shoppe is a Tri-State Pharmacy located about 5 minutes from Ohio and 10 minutes from Kentucky. We are licensed in all three states. Approximately 99 % of all the controlled prescription come from the immediate Huntington area. Most of our patients are located within a 20 mile radius of our store. A small percentage of the prescriptions are filled for patients living outside of a 60 mile radius, that are treated by these local physicians.

We do not fill prescriptions for any new patients without first checking the Board of Pharmacy website to make sure the patient is not doctor shopping.

Sincerely,

A handwritten signature in dark ink, appearing to read "Joe McGlothlin". The signature is fluid and cursive, with the first name "Joe" being more prominent.

Joe McGlothlin R.Ph.

Medicine Shoppe Pharmacy

Huntington, WV

Store #: 0290

02/27/2012

PPX, INC. - PDK PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1

01/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
TRAMADOL HCL 50 MG TAB AMN	65162062711	129	12123	242.40	1914.12	1,671.72	87.34	12.96
TRAMADL/APAP 37.5-3 TAB MYL	00378808805	3	240	51.04	105.49	54.45	51.62	18.15
TRAMADL/APAP 37.5-3 TAB MYL	00378808801	4	210	47.62	119.93	72.31	60.29	18.08
TOTAL FOR SELECTED DRUGS		136	12573	341.06	2139.54	1,798.48	84.06	13.22

SELECTION CRITERIA	Tx Date Range	11/24/2011	02/24/2012	Report Type:
	Drug Code	TRAM1004	TRAM50X	Report Order: 1
	GPI			Number Drugs: 100
	Drug Schedule			Summary Only: N
	Canada Sched			List Each Tx: N
	Drug Group			Compnd Ingrd: Y
	NDC/DIN Code			Zero Price:
	ASHP Class			
	Patient Code			
	Patient Group			
	Physician Code			
	Price Code			
	T/P Carrier			
	T/P Plan			

Store #: 0290

02/27/2012

PDX, Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1

11/24/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
BUT/APAP/CAF	TAB QUA 00603254421	15	560	27.69	227.69	200.00	87.84	13.33
TOTAL FOR SELECTED DRUGS		15	560	27.69	227.69	200.00	87.84	13.33
SELECTION CRITERIA	Tx Date Range 11/24/2011 02/24/2012 Report Type: Drug Code BUTA3256 BUTA3256 Report Order: 1 GPI Number Drugs: 100 Drug Schedule Summary Only: N Canada Sched List Each Tx: N Drug Group Compnd Ingrd: Y NDC/DIN Code Zero Price: ASHP Class Patient Code Patient Group Physician Code Price Code T/P Carrier T/P Plan							

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CAH_FEDWV_00000621

P-42116_00128

02/27/2012

 PDV Inc. PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

 Page: 1
 02/24/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
HYDROCO/APAP 10-500 TAB WAT	00591054005	237	20147	1,870.62	4439.10	2,568.48	57.86	10.84
OXYCODONE 30MG TAB ACT	00228287911	130	18008	5,342.44	9013.40	3,670.96	40.73	28.24
HYDROCO/APAP 5-500M TAB WAT	00591034905	195	11979	460.03	1687.91	1,227.88	72.75	6.30
OXYCODONE 30 MG TAB MAL	00406853001	76	10818	3,581.96	5452.21	1,870.25	34.30	24.61
HYDROCO/APAP 7.5-50 TAB WAT	00591038505	151	10740	416.36	2257.46	1,841.10	81.56	12.19
DIAZEPAM 10 MG TAB WAT	00591562010	113	9744	181.92	1742.61	1,560.69	89.56	13.81
ALPRAZOLAM 1 MG TAB GRE	59762372104	98	8504	233.27	1292.79	1,059.52	81.96	10.81
OXYCODONE 15MG TAB ACT	00228287811	75	7913	1,573.65	2575.34	1,001.69	38.90	13.36
ALPRAZOLAM 0.5 MG TAB GRE	59762372004	86	6721	172.90	1168.85	995.95	85.21	11.58
METHADONE 10 MG TAB MAL	00406577101	48	6211	410.49	874.04	463.55	53.04	9.66
DIAZEPAM 5 MG TAB IVA	00172392670	72	6038	108.91	830.06	721.15	86.88	10.02
ALPRAZOLAM 0.25 MG TAB GRE	59762371904	72	4356	94.76	776.27	681.51	87.79	9.47
OXYCOD/APAP 5-325 M TAB MAL	00406051201	59	4066	149.60	648.07	498.47	76.92	8.45
HYDROCO/APAP 10-325 TAB QUA	00603388728	40	3819	370.77	1022.53	651.76	63.74	16.29
OXYCOD/APAP 10-325M TAB AMN	53746020401	38	3194	1,050.99	1887.60	836.61	44.32	22.02
CLONAZEPAM 1 MG TAB TEV	00093083310	45	3103	68.27	564.70	496.43	87.91	11.03
OXYCONTIN 80MG CR TAB PUR	59011048010	29	2594	30,940.25	33058.41	2,118.16	6.41	73.04
METHADONE 10 MG TAB ROX	00054457125	18	2508	180.83	294.32	113.49	38.56	6.30
OPANA ER 40MG TAB END	63481069370	33	2498	28,515.11	30443.49	1,928.38	6.33	58.44
LORAZEPAM 0.5 MG TAB ACT	00228205750	51	2407	57.22	519.92	462.70	88.99	9.07
OXYCODONE 15 MG TAB MAL	00406851501	20	2374	531.95	833.36	301.41	36.17	15.07
OXYCONTIN 40MG CR TAB PUR	59011044010	33	2358	14,967.23	16123.44	1,156.21	7.17	35.04
CHERATUSSIN AC SYP QUA	00603107558	14	2225	18.42	105.52	87.10	82.54	6.22
ALPRAZOLAM 0.5 MG TAB DAV	67253090111	26	1980	39.75	385.25	345.50	89.68	13.29
ALPRAZOLAM 2 MG TAB DAV	67253090350	22	1980	176.74	448.48	271.74	60.59	12.35
CLONAZEPAM 0.5MG TAB SAN	00185006310	26	1876	28.52	382.30	353.78	92.54	13.61
OXYCODONE 5MG IR TAB QUA	00603499028	28	1864	377.82	470.89	93.07	19.76	3.32
LYRICA 150MG CAP PFI	00071101668	29	1864	4,902.00	5248.84	346.84	6.61	11.96
ALPRAZOLAM 1MG TAB DAV	67253090211	20	1812	57.99	342.19	284.20	83.05	14.21
ZOLPIDEM 10MG TAB MYL	00378531005	69	1796	35.18	544.16	508.98	93.53	7.38
ZOLPIDEM 10MG TAB QUA	00603646928	61	1764	35.83	572.33	536.50	93.74	8.80
OPANA ER 20 MG TAB END	63481061770	30	1509	9,260.21	9928.00	667.79	6.73	22.26

02/27/2012

PBX, Inc. PDK PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORTPage: 2
11/24/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
HYDROCO/APAP 7.5-32 TAB MAL	00406036601	17	1504	260.46	575.09	314.63	54.71	18.51
LORAZEPAM 1 MG TAB RAN	63304077310	24	1470	33.93	281.58	247.65	87.95	10.32
LYRICA 75MG CAP PFI	00071101468	25	1452	3,816.00	4127.67	311.67	7.55	12.47
OPANA ER 30 MG TAB END	63481057170	29	1428	12,655.06	13497.63	842.57	6.24	29.05
OPANA ER 10 MG TAB END	63481067470	20	1368	4,741.21	5030.33	289.12	5.75	14.46
PROMETH/COD 6.25-10 SYP QUA	00603158558	10	1360	14.50	77.04	62.54	81.18	6.25
ENDOCET 10-325MG TAB END	60951071270	13	1188	599.74	674.91	75.17	11.14	5.78
CLONAZEPAM 0.5 MG TAB TEV	00093083210	14	1170	15.98	173.95	157.97	90.81	11.28
ALPRAZOLAM 2MG TAB DAV	67253090310	15	1155	148.60	340.53	191.93	56.36	12.80
LORAZEPAM 2 MG TAB ACT	00228206350	13	1081	50.15	194.51	144.36	74.22	11.10
HYDROCO/APAP 10-325 TAB QUA	00603388732	10	1062	91.49	209.28	117.79	56.28	11.78
HYDROMORPHON 4MG TAB ROX	00054026425	10	1026	104.03	245.11	141.08	57.56	14.11
DIAZEPAM 2 MG TAB IVA	00172392560	14	925	19.53	138.55	119.02	85.90	8.50
HYDROCO/APAP 10-650 TAB MAL	00406036101	14	889	50.17	140.53	90.36	64.30	6.45
OXYCONTIN 20MG CR TAB PUR	59011042010	17	878	3,137.66	3394.74	257.08	7.57	15.12
MORPHINE SUL 60MG E TAB MYL	00378266001	15	872	399.67	569.14	169.47	29.78	11.30
HYDROCO/APAP 7.5-50 SOL PHA	00121065516	1	800	13.24	35.90	22.66	63.12	22.66
TEMAZEPAM 30 MG CAP MYL	00378505005	21	720	65.24	249.73	184.49	73.88	8.79
OXYMORPHONE 7.5MG ER TB ACT	00228326111	13	720	1,608.33	1778.82	170.49	9.58	13.11
OXYCOD/APAP 10-325 TAB MAL	00406052301	10	706	226.20	538.98	312.78	58.03	31.28
ROXICODONE 30 MG TAB XAN	66479058210	6	672	1,630.36	1736.79	106.43	6.13	17.74
OXYCONTIN 10MG CR TAB PUR	59011041010	10	650	1,219.24	1328.28	109.04	8.21	10.90
ALPRAZOLAM 2 MG TAB GRE	59762372203	7	630	39.00	126.60	87.60	69.19	12.51
OXYCODONE 10MG IR TAB KVKT	10702005601	12	620	137.05	325.67	188.62	57.92	15.72
OXYCONTIN 60MG CR TAB PUR	59011046010	8	616	5,709.08	6056.49	347.41	5.74	43.43
APAP/CODEINE 300-30 TAB MAL	00406048401	21	615	73.76	163.78	90.02	54.96	4.29
HYDROCO/APAP 7.5-32 TAB WAT	00591320301	6	600	113.02	197.21	84.19	42.69	14.03
PHENTERMINE 37.5MG TAB MUT	53489040601	15	596	68.93	414.73	345.80	83.38	23.05
ROXICET 5-325 MG TAB ROX	00054465029	11	585	35.56	160.51	124.95	77.85	11.36
TEMAZEPAM 15 MG CAP MYL	00378401005	17	570	32.27	164.52	132.25	80.39	7.78
LYRICA 50MG CAP PFI	00071101368	6	544	1,422.24	1528.68	106.44	6.96	17.74
OXYCONTIN 30MG CR TAB PUR	59011043010	7	532	2,696.43	2835.87	139.44	4.92	19.92

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P-42116_00130

02/27/2012

 PDY, INC. PCK PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

Page: 3

02/21/2011 02/24/2012

Drug Name		NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
PHENOBARB 15 MG	TAB WES	00143144510	4	510	23.42	56.80	33.38	58.77	8.35
CONCERTA 36MG	TAB MCN	50458058601	11	510	3,005.16	3135.83	130.67	4.17	11.88
APAP/CODEINE 300-60	TAB MAL	00406048505	6	510	104.04	156.78	52.74	33.64	8.79
METHADONE 5 MG	TAB MAL	00406575501	7	483	21.80	64.92	43.12	66.42	6.16
ZOLPIDEM 5 MG	TAB MYL	00378530501	18	475	13.28	98.19	84.91	86.48	4.72
MORPHINE SUL 20 MG	CAP ACT	00228350211	12	472	1,619.96	1885.48	265.52	14.08	22.13
OKYCOD/APAP 7.5-325	TAB MAL	00406052201	6	458	146.82	198.93	52.11	26.20	8.69
TESTIM 1%(50 MG)	PCK GEL AU	66887000105	3	450	899.69	959.87	60.18	6.27	20.06
ATIVAN 2MG	TAB VAL	64455006501	5	450	2,423.50	2744.33	320.83	11.69	64.17
OXYCODONE 20MG/ML	CON LAN	00527142636	7	435	1,105.24	767.64	337.60	43.98	48.23
MORPHINE SUL 15MG E	TAB WAT	42858080101	9	430	88.30	160.45	72.15	44.97	8.02
LORTAB 10	TAB UCB	50474091050	4	420	608.50	672.06	63.56	9.46	15.89
ENDOCET 10-650MG	TAB END	60951079770	4	404	181.14	195.75	14.61	7.46	3.65
MORPHINE SUL ER 15 MG	TAB	00406831501	9	372	149.72	132.45	17.27	13.04	1.92
OXYCODONE 5MG	TAB KVK	10702001801	4	370	41.06	99.45	58.39	58.71	14.60
OXYCODONE 30MG	TAB CAR	57664022488	4	366	157.16	180.23	23.07	12.80	5.77
PHENOBARB 30 MG	TAB WES	00143145010	6	360	20.87	28.35	7.48	26.38	1.25
LYRICA 100MG	CAP PFI	00071101568	4	360	917.58	966.95	49.37	5.11	12.34
HYD POLST-CH LOR PO	LIQ PAR	49884023533	2	360	169.31	183.73	14.42	7.85	7.21
DEMEROL 100MG	TAB SAN	00024033704	3	360	986.76	1036.37	49.61	4.79	16.54
HYDROMORPHON 2MG	TAB LAN	00527135301	3	344	29.34	73.73	44.39	60.21	14.80
VYVANSE 60MG	CAP SHI	59417010610	11	330	1,659.31	1777.05	117.74	6.63	10.70
MORPHINE SUL 20 MG/	SOL LAN	00527142536	14	330	164.27	238.12	73.85	31.01	5.28
METHYLPHENID 20MG ER	TB MAL	00406147301	4	330	82.42	299.91	217.49	72.52	54.37
ZOLPIDEM CR 12.5MG	TAB	10370011610	11	324	962.73	1355.81	393.08	28.99	35.73
OXYMORPHONE 15MG ER	TAB ACT	00228326211	5	316	1,287.44	1350.30	62.86	4.66	12.57
DIPHEN/ATROP 2.5MG	TAB GRE	59762106101	4	310	39.43	96.97	57.54	59.34	14.39
ALPRAZOLAM 0.25 MG	TAB DAV	67253090011	7	304	5.06	90.29	85.23	94.40	12.18
METHYLPHENID 54MG E	TAB WAT	00591271801	10	300	1,548.60	1660.58	111.98	6.74	11.20
CARISOPRODOL 350 MG	TAB QUA	00603258228	5	300	43.23	68.16	24.93	36.58	4.99
ANDROGEL 1%(50MG)	GEL ABB	00051845030	2	300	626.11	663.05	36.94	5.57	18.47
ANDROGEL PUMP 1%	GEL ABB	00051848888	2	300	624.82	666.69	41.87	6.28	20.94

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P-42116_00131

02/27/2012

 PDV, INC. - PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

Page: 4

11/21/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
NUCYNTA 50MG	TAB JAN 50458082004	6	290	585.64	627.50	41.86	6.67	6.98
MORPHINE SUL 15MG E	TAB MYL 00378265801	5	288	55.70	91.06	35.36	38.83	7.07
AMPHETAMINE 20MG ER	CAP GLO 00115133101	9	280	1,247.49	1347.38	99.89	7.41	11.10
OXYCOD/APAP 10-650M	TAB AMN 53746020601	4	272	112.13	122.60	10.47	8.54	2.62
LYRICA 200MG	CAP PFI 00071101768	5	270	710.09	746.23	36.14	4.84	7.23
CLONAZEPAM 2 MG	TAB ACT 00228300550	5	270	8.80	51.24	42.44	82.83	8.49
AMPHETAMINE 10MG	TAB TEV 00555097202	7	270	286.44	352.93	66.49	18.84	9.50
ALPRAZOLAM 2 MG	TAB GRE 59762372201	2	270	15.41	45.54	30.13	66.16	15.07
CLORAZ DIPOT 3.75 M	TAB MYL 00378003001	4	260	32.36	81.49	49.13	60.29	12.28
HYDROCO/APAP 5-325M	TAB MAL 00406036501	4	255	36.94	69.56	32.62	46.89	8.16
FOCALIN XR 20MG	CAP NOV 00078043205	4	240	1,309.72	1386.12	76.40	5.51	19.10
FENTANYL 25MCG/HR	DIS MYL 00378912198	18	235	1,412.21	1885.07	472.86	25.08	26.27
NUCYNTA ER 100 MG	TAB JAN 50458086101	5	234	1,021.12	1092.24	71.12	6.51	14.22
PENTAZOCINE/ NALOXO	TAB GAV 43386068001	4	210	206.45	262.22	55.77	21.27	13.94
LUNESTA 3MG	TAB SUN 63402019310	9	210	1,336.89	1453.95	117.06	8.05	13.01
BUT/ASA/CAFF	TAB WES 00143178501	3	210	21.68	69.79	48.11	68.94	16.04
AMPHETAMINE 30MG	TAB TEV 00555097402	7	210	287.07	264.15	22.92-	8.68-	3.27-
XANAX 0.5 MG	TAB PFI 00009005501	1	200	362.09	378.68	16.59	4.38	16.59
MORPHINE SUL 30MG ER	TB MAL 00406833001	4	198	188.20	124.40	63.80-	51.29-	15.95-
FENTANYL 50MCG/HR	DIS ACT 67767012118	18	185	1,372.66	2351.88	979.22	41.64	54.40
MORPHINE SUL 100 MG	TAB MYL 00378266101	3	182	655.97	171.23	484.74-	283.09-	161.58-
VYVANSE 70MG	CAP SHI 59417010710	6	180	906.04	960.82	54.78	5.70	9.13
VYVANSE 40MG	CAP SHI 59417010410	6	180	895.46	956.48	61.02	6.38	10.17
PHENOBARB 97.2 MG	TAB QUA 00603516821	3	180	15.84	35.85	20.01	55.82	6.67
OXYMORPHONE HCL 5MG	TAB ROX 00054028325	2	180	339.40	434.68	95.28	21.92	47.64
METHYLPHENID 36MG E	TAB WAT 00591271701	5	180	888.48	874.43	14.05-	1.61-	2.81-
METHYLPHENID 10MG	TAB WAT 00591588301	3	180	21.38	47.93	26.55	55.39	8.85
KADIAN 30MG CR	CAP ACT 46987032511	3	180	886.67	974.28	87.61	8.99	29.20
HYDROCOD/HOM 5-1.5/	SYP HI- 50383004316	1	180	15.18	25.95	10.77	41.50	10.77
BUT/ASA/CAFF	CAP WAT 00591321901	2	180	48.00	96.47	48.47	50.24	24.24
SUBOXONE 8-2MG	SUB REC 12496130602	3	172	1,220.00	1288.80	68.80	5.34	22.93
OXYCONTIN 15MG CR	TAB PUR 59011041510	3	168	471.86	512.22	40.36	7.88	13.45

02/27/2012

 PDV TAG RLY PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

 Page 5
 11/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
FENTANYL 50MCG/HR	DIS MYL 00378912298	13	155	1,665.91	1944.89	278.98	14.34	21.46
ZAILEPLON 10MG	CAP ASC 67877021101	5	150	37.38	125.50	88.12	70.22	17.62
KADIAN 60MG CR	CAP ACT 46987032611	3	150	1,479.75	1618.80	139.05	8.59	46.35
FENTANYL 25 MCG/HR	DIS ACT 67767012018	14	150	663.90	1065.97	402.07	37.72	28.72
CARISOPRODOL 350 MG	TAB SUN 62756044605	2	150	10.15	38.63	28.48	73.73	14.24
AMPHETAMINE 20MG ER	CAP TEV 00555078802	4	150	732.10	707.63	24.47-	3.46-	6.12-
ADDERALL XR 20 MG	CAP SHI 54092038701	3	150	955.67	1007.33	51.66	5.13	17.22
MORPHINE SUL 30 MG	TAB RHO 42858080201	2	144	126.38	137.72	11.34	8.23	5.67
KADIAN 20MG CR	CAP ACT 46987032211	7	140	648.53	710.28	61.75	8.69	8.82
METHADONE 5 MG/5ML	SOL ROX 00054355563	14	129	8.07	65.62	57.55	87.70	4.11
DIPHEN/ATROP 2.5MG	TAB MYL 00378041510	3	127	13.29	35.46	22.17	62.52	7.39
ZOLPIDEM 10 MG	TAB MYL 00378531001	4	120	2.44	18.04	15.60	86.47	3.90
VIMPAT 100 MG	TAB SCH 00131247835	2	120	857.96	915.18	57.22	6.25	28.61
PROMETH VC/ CODEINE	SYP QUA 00603158858	1	120	10.50	11.85	1.35	11.39	1.35
NUCYNIA 100MG	TAB JAN 50458084004	1	120	376.83	400.42	23.59	5.89	23.59
METHYLIN ER 20MG	TAB MAL 00406145101	3	120	28.25	103.55	75.30	72.72	25.10
LYRICA 300MG	CAP PFI 00071101868	2	120	314.37	340.31	25.94	7.62	12.97
LORTAB 10	TAB UCB 50474091001	2	120	192.59	279.90	87.31	31.19	43.66
HYDROCO/APAP 5-325M	TAB QUA 00603389028	2	120	21.64	50.52	28.88	57.17	14.44
FENTANYL 100MCG/H	DIS ACT 67767012318	12	120	1,954.07	2761.13	807.06	29.23	67.25
DRONABINOL 2.5MG	CAP PAR 49884086702	2	120	440.62	459.96	19.34	4.20	9.67
DEXMETHYLPH 10MG	TAB TEV 00093527701	4	120	134.40	142.91	8.51	5.95	2.13
AMPHETAMINE 20MG	TAB SAN 00185040101	2	120	129.75	172.90	43.15	24.96	21.58
MORPHINE SUL 100 MG	TAB END 60951065870	2	114	142.60	129.07	13.53-	10.48-	6.77-
OXYCODONE 30 MG	TAB ACT 52152021502	1	112	38.61	49.96	11.35	22.72	11.35
NUCYNIA 75MG	TAB JAN 50458083004	2	112	264.64	283.58	18.94	6.68	9.47
HYDROMORPHON 2MG	TAB RHO 42858030101	1	112	47.28	23.97	23.31-	97.25-	23.31-
OXAZEPAM 15 MG	CAP ACT 00228206910	2	108	103.75	62.71	41.04-	65.44-	20.52-
OXYMORPHONE HCL 10M	TAB ROX 00054028425	2	100	347.75	375.44	27.69	7.38	13.85
DIPHEN/ATROP 2.5MG	TAB MYL 00378041501	1	100	43.01	14.21	28.80-	202.67-	28.80-
ADDERALL XR 15 MG	CAP SHI 54092038501	4	96	612.10	649.90	37.80	5.82	9.45
VYVANSE 20MG	CAP SHI 59417010210	3	90	447.73	476.10	28.37	5.96	9.46

02/27/2012

 PDV Tag PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

12/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
OXYMORPHONE HCL 5MG TAB END	60951079470	1	90	204.40	219.86	15.46	7.03	15.46
OXAZEPAM 15MG CAP SAN	00781281001	1	90	34.58	41.50	6.92	16.67	6.92
OXAZEPAM 15 MG CAP IVA	00172480560	1	90	31.49	41.50	10.01	24.12	10.01
MORPHINE SUL 60 MG ER TAB M	00406838001	2	90	103.87	58.78	45.09-	76.71-	22.55-
METHYLPHENID 18MG E TAB WAT	00591271501	3	90	424.62	432.24	7.62	1.76	2.54
FOCALIN XR 10MG CAP NOV	00078043105	3	90	473.76	489.06	15.30	3.13	5.10
ESTAZOLAM 2 MG TAB TEV	00093013001	3	90	23.73	38.10	14.37	37.72	4.79
DEKMETHYLPH 5 MG TAB TEV	00093527601	2	90	68.96	70.48	1.52	2.16	0.76
CLONAZEPAM 2 MG TAB ACT	00228300511	1	90	3.03	15.00	11.97	79.80	11.97
APAP/CODEINE 300-15 TAB QUA	00603233721	3	90	10.74	25.02	14.28	57.07	4.76
AMBIEN CR 12.5MG TAB SAN	00024552131	3	90	550.30	576.70	26.40	4.58	8.80
ADDERALL XR 10 MG CAP SHI	54092038301	3	90	573.09	607.41	34.32	5.65	11.44
HYDROCO/APAP 7.5-75 TAB MAL	00406036005	4	88	2.90	55.74	52.84	94.80	13.21
MORPHINE SUL 15MG IR TB ROX	00054023525	2	86	5.93	11.41	5.48	48.03	2.74
KADIAN 10MG CR CAP ACT	46987041011	6	84	344.36	390.48	46.12	11.81	7.69
LORAZEPAM 2 MG/ML CON ROX	00054353244	5	81	80.31	107.92	27.61	25.58	5.52
FENTANYL 100MCG/H DIS MYL	00378912498	8	80	1,917.52	2120.21	202.69	9.56	25.34
PROVIGIL 200 MG TAB CEP	63459020101	3	75	1,355.83	2071.91	716.08	34.56	238.69
PHENTERMINE 37.5MG TAB LAN	00527144501	3	75	11.27	92.95	81.68	87.88	27.23
FENTANYL 75MCG/HR DIS ACT	67767012218	8	65	860.80	1404.20	543.40	38.70	67.93
FENTANYL 75MCG/HR DIS MYL	00378912398	7	65	1,175.98	1356.62	180.64	13.32	25.81
MORPHINE SUL 100 MG SR TAB	00406839001	2	60	41.07	98.83	57.76	58.44	28.88
METHYLIN 5MG TAB MAL	00406112101	1	60	14.86	8.97	5.89-	65.66-	5.89-
METHYLPHENID 5 MG TAB UCB	53014053107	1	60	20.50	15.98	4.52-	28.29-	4.52-
METHYLPHENID 10 MG TAB UCB	53014053007	2	60	30.80	34.06	3.26	9.57	1.63
LUNESTA 2MG TAB SUN	63402019110	2	60	382.14	409.25	27.11	6.62	13.56
KADIAN 100MG CR CAP ACT	46987032411	1	60	985.22	1079.58	94.36	8.74	94.36
HYDROCO/APAP 7.5-50 TAB MAL	00406035805	1	60	2.35	10.55	8.20	77.73	8.20
DAYTRANA 30MG/9HR DIS NOV	68968555503	2	60	344.88	360.93	16.05	4.45	8.03
CONCERTA 54MG TAB MCN	50458058701	2	60	385.27	412.48	27.21	6.60	13.61
CLORAZ DIPOT 7.5 MG TAB TAR	51672404302	2	60	25.14	27.90	2.76	9.89	1.38
CLONAZEPAM 0.5MG TAB QUA	00603294832	1	60	1.46	3.75	2.29	61.07	2.29

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02/27/2012

 PDV, Inc. - RIX PHARMACY SYSTEMS
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

 Page 7
 11/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
CDP/AMITRIP 5-12.5M TAB MYL	00378021101	2	60	36.82	43.50	6.68	15.36	3.34
AMPHETAMINE 5MG ER CAP GLO	00115132801	2	60	292.84	306.22	13.38	4.37	6.69
AMPHETAMINE 30MG ER CAP TEV	00555078902	1	60	292.84	304.77	11.93	3.91	11.93
AMPHETAMINE 10MG ER CAP GLO	00115132901	2	60	269.71	294.01	24.30	8.27	12.15
AMPHETAMINE 15MG TAB TEV	00555077702	1	55	55.82	74.89	19.07	25.46	19.07
ZALEPLON 5MG CAP COR	64720032210	2	50	13.98	67.45	53.47	79.27	26.74
ASCOMP/COD 30MG CAP BRE	51991007401	1	50	26.71	61.95	35.24	56.88	35.24
MORPHINE SUL 20MG/M SOL ROX	00054040444	2	45	24.97	35.45	10.48	29.56	5.24
PROVIGIL 100 MG TAB CEP	63459010101	2	42	534.18	742.21	208.03	28.03	104.02
EXALGO 8MG SR TAB MAL	23635040801	2	42	367.19	415.57	48.38	11.64	24.19
TUSSICAPS 10-8MG CAP ECR	23635010820	2	40	160.40	179.56	19.16	10.67	9.58
HYDROCO/APAP 7.5-65 TAB MAL	00406035901	2	40	1.74	14.89	13.15	88.31	6.58
SUBOXONE 8-2MG FILM MIS REC	12496120803	3	35	221.67	237.11	15.44	6.51	5.15
METHYLPHENID 10MG TAB MAL	00406114401	1	30	2.58	11.36	8.78	77.29	8.78
METADATE CD 40 MG CAP UCB	53014058207	1	30	191.08	202.25	11.17	5.52	11.17
METADATE CD 10 MG CAP UCB	53014057907	1	30	139.32	148.35	9.03	6.09	9.03
FOCALIN XR 5MG CAP NOV	00078043005	1	30	160.70	170.47	9.77	5.73	9.77
FOCALIN XR 35MG CAP NOV	00078060905	1	30	227.30	194.64	32.66-	16.78-	32.66-
FENTANYL 12MCG/HR DIS MYL	00378911998	3	30	288.56	482.61	194.05	40.21	64.68
DEXTROAMPHET 15 MG ER CP CO	64720032909	1	30	206.09	143.46	62.63-	43.66-	62.63-
*0.5BIEST1.0/PROGEST100/	51927171400	1	30	2.13	30.00	27.87	92.90	27.87
CLONAZEP ODT 0.5 MG TAB TEV	00555009696	1	30	24.74	30.19	5.45	18.05	5.45
CHLORDIAZEP 10MG CAP TEV	00555003302	1	30	2.10	8.66	6.56	75.75	6.56
AMPHETAMINE 30MG ER CAP GLO	00115133301	1	30	140.39	175.98	35.59	20.22	35.59
AMPHETAMINE 5MG TAB SAN	00185008401	1	30	33.44	41.29	7.85	19.01	7.85
AMPHETAMINE 10MG ER CAP TEV	00555078702	1	30	153.29	193.95	40.66	20.96	40.66
AMPHETAMINE 10MG TAB SAN	00185011101	1	30	37.63	38.97	1.34	3.44	1.34
ADDERALL XR 30 MG CAP SHI	54092039101	1	30	187.78	202.47	14.69	7.26	14.69
ADDERALL 15MG TAB TEV	00555076602	1	30	112.08	120.24	8.16	6.79	8.16
FENTORA 100MCG TAB CEP	63459054128	1	28	678.02	727.90	49.88	6.85	49.88
DURAGESIC 100MCG/H DIS JAN	50458009405	2	20	1,640.57	1732.72	92.15	5.32	46.08
DURAGESIC 50MCG/HR DIS JAN	50458009205	1	15	576.81	615.92	39.11	6.35	39.11

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02/27/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
DURAGESIC 25MCG/HR DIS JAN	50458009105	1	15	348.09	371.65	23.56	6.34	23.56
TESTOST CYP 200MG/M INJ WAT	00591322379	1	10	84.49	94.49	10.00	10.58	10.00
OXYCOD/APAP 10-650M TAB MYL	00378710801	1	10	12.55	9.80	2.75-	28.06-	2.75-
AMBIEN CR 6.25MG TAB SAN	00024550131	1	10	60.31	71.16	10.85	15.25	10.85
DIASTAT ACDL 5-10MG GEL VAL	00187065820	2	9	2,716.04	2844.29	128.25	4.51	64.13
TESTOST CYP 200MG/M INJ PAD	00574082001	3	8	151.40	153.77	2.37	1.54	0.79
DEPO-TESTOST 200MG/ INJ PFI	00009041701	1	2	44.50	49.59	5.09	10.26	5.09
DIASTAT ACDL 12.5-20MG GEL	00187065920	1	1	301.78	317.98	16.20	5.09	16.20
TOTAL FOR SELECTED DRUGS		3116	224781	218,335.38	264325.93	45,990.55	17.40	14.76

SELECTION CRITERIA Tx Date Range 11/24/2011 02/24/2012 Report Type:
Drug Code Report Order: 1
GPI Number Drugs: 9999
Drug Schedule Summary Only: N
Canada Sched List Each Tx: N
Drug Group Compound Ingrd: Y
NDC/DIN Code Zero Price:
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Use Select Criteria From This Screen: Y

Rx Number	Starting	Ending	Refills Auth	Starting	Ending
Date Written	2000000	5999999	Refills Rem		
First Filled			Ordered Qty		
Rx Expires			Qty Left		
Stop Date			Days Supply		
Follow Up			Qty Owed		
Merge			Deactivate		
Rx Group			Status		
Disease Code			SUBS Drug		
SIG			AutoFill Qty		
RxQue Number					

Phone: Compound: N Allow AutoFill:
Transfer: Rx Updated: AutoFill No Refs:
RxDAW:

From: Howenstein, Kim
To: Kave, Jesse
Cc: Emma, Douglas
Subject: RE: [SOMStatus] Notification of New Customer File
Date: Friday, March 09, 2012 9:24:00 AM
Attachments: Response for Pharmaceutical Threshold Event.pdf

Good Morning Jesse,
My earlier e-mail sent this morning -

Could you please provide me with the name of the prescriber of the Lisdexamfetamine Mesylate and the pharmacy that was recently closed?

This is stemming from his TH Event Survey (See attached)

Thank you,
Kim

-----Original Message-----

From: Kave, Jesse
Sent: Thursday, March 08, 2012 10:26 PM
To: Howenstein, Kim
Subject: FW: [SOMStatus] Notification of New Customer File

Kim,
Please see if this is one of the shifts in drug purchases Joe address in his threshold survey.

Thanks,
Jesse Kave
Cardinal Health
Pharmacy Business Consultant
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

-----Original Message-----

From: support@mycardinalsomstatus.com [<mailto:support@mycardinalsomstatus.com>]
Sent: Thursday, March 08, 2012 11:46 AM
To: Kave, Jesse
Cc: Anderson, Chris J; Farrell, Daniel (PD); Nicolli, Jason; Kramer, Kathy; Seiden, Mark; Schrebe, Melissa; Montgomery, Steven; Folmar, Tom
Subject: [SOMStatus] Notification of New Customer File

A customer that is assigned to you has had an order blocked as a result of a controlled substance order threshold limit. You will receive additional notifications from this system anytime the status of this file changes.

Customer must complete the one-page questionnaire.
Questionnaire is available at: <http://www.cardinalhealth.com/thresholdsurvey>

Customer Name: MED SHOPPE #0290 HNTNGTN CSOS
DEA#: BT5541760
Segment: RETAIL INDEPENDENT
Group: MEDICINE SHOPPE INDEPENDENT
Address: 2402 ADAMS AVE HUNTINGTON, WV 25704 Phone Number: 3044296716 Overage Date: Mar 07, 2012
Item Description: VYVANSE 50MG 100 C2
Family Base Code: LISDEXAMFETAMINE MESYLATE (1205) Status Justification:
Justification Comments:

Thanks,
SOM Status System

From: "Inquisite Server"
To: GMB-QRA-AD-Thresholds
Subject: Response for Pharmaceutical Threshold Event
Date: Tuesday, February 21, 2012 4:45:42 PM

E-mail notification for survey response
Survey Title: Pharmaceutical Threshold Event
Respondent Unique Key: INQ-20120221152616-968883095
Response Date: Tue, Feb 21, 2012 15:45:25

Page 1

Facility Name:
{Enter text answer}
[The Medicine Shoppe]

Facility Address:
{Enter text answer}
[2402 Adams Avenue Huntington, WV 25704]

Facility Contact:
{Enter text answer}
[Joe McGlothlin]

Facility Phone:
{Enter text answer}
[3044296716]

Facility Fax No.:
{Enter text answer}
[3044291924]

Please outline the underlying factors that are contributing to your need for the increased quantities of the drug family:
{Enter answer in paragraph form}
[A competing pharmacy closed last week that filled a majority of these prescriptions for a ADHD (Behavioral Medicine Specialist)Physician. We were already filling prescriptions from this physician but we will be receiving more prescriptions resulting in increased purchases.]

Name of Drug Family held per Regulatory Review:
{Enter text answer}
[Amphetamines and Stimulants for ADHD]

Facility DEA#:
{Enter text answer}
[BT5541760]

Name of Person Responding:
{Enter text answer}
[Joe McGlothlin]

From: Howenstein, Kim
To: Kave, Jesse
Subject: T AND J ENTERPRISES INC - DBA THE MEDICINE SHOPPE,2402
Date: Friday, March 09, 2012 8:29:00 AM

Good Morning Jesse,
Hope all is well. Could you please provide me with the name of the prescriber of the
Lisdexamfetamine Mesylate and the pharmacy that was recently closed?

Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance| QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

From: Kave, Jesse
To: Howenstein, Kim
Cc: Farrell, Daniel (PD)
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 5:45:25 PM
Attachments: [Picture 711.jpg](#)
[Picture 712.jpg](#)
[Picture 713.jpg](#)
[Picture 714.jpg](#)
[Picture 715.jpg](#)
[Picture 716.jpg](#)
[Picture 717.jpg](#)
[Picture 718.jpg](#)
[Picture 719.jpg](#)
[Picture 720.jpg](#)
[Picture 721.jpg](#)

Kim,

Please see attached report for T&J for all controls report plus Top doctors report to follow in next email. Excel format not available.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.
I appreciate the information.

Kim

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim" <kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

From: Kave, Jesse
Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim

Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim

Can I remove your name and forward to customer?

Jesse

Sent from my iPhone

On Feb 9, 2012, at 4:15 PM, "Howenstein, Kim"

<kim.howenstein@cardinalhealth.com> wrote:

Good Afternoon Jesse,

I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.

Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,

Kim

Kim Howenstein

Specialist, Quality Assurance | QRA

7000 Cardinal Place

Dublin, OH 43017

Phone: (614) 757-5524

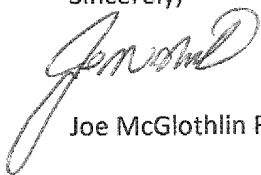
Fax: (614) 553-6147

Kim Howenstein,

The Medicine Shoppe is a Tri-State Pharmacy located about 5 minutes from Ohio and 10 minutes from Kentucky. We are licensed in all three states. Approximately 99 % of all the controlled prescription come from the immediate Huntington area. Most of our patients are located within a 20 mile radius of our store. A small percentage of the prescriptions are filled for patients living outside of a 60 mile radius, that are treated by these local physicians.

We do not fill prescriptions for any new patients without first checking the Board of Pharmacy website to make sure the patient is not doctor shopping.

Sincerely,

A handwritten signature in dark ink, appearing to read "Joe McGlothlin". The signature is fluid and cursive, with the first name "Joe" being more prominent.

Joe McGlothlin R.Ph.

Medicine Shoppe Pharmacy

Huntington, WV

Store #: 0290

02/27/2012

PPX, INC. - PDK PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1

01/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
TRAMADOL HCL 50 MG TAB AMN	65162062711	129	12123	242.40	1914.12	1,671.72	87.34	12.96
TRAMADL/APAP 37.5-3 TAB MYL	00378808805	3	240	51.04	105.49	54.45	51.62	18.15
TRAMADL/APAP 37.5-3 TAB MYL	00378808801	4	210	47.62	119.93	72.31	60.29	18.08
TOTAL FOR SELECTED DRUGS		136	12573	341.06	2139.54	1,798.48	84.06	13.22

SELECTION CRITERIA	Tx Date Range	11/24/2011	02/24/2012	Report Type:
	Drug Code	TRAM1004	TRAM50X	Report Order: 1
	GPI			Number Drugs: 100
	Drug Schedule			Summary Only: N
	Canada Sched			List Each Tx: N
	Drug Group			Compnd Ingrd: Y
	NDC/DIN Code			Zero Price:
	ASHP Class			
	Patient Code			
	Patient Group			
	Physician Code			
	Price Code			
	T/P Carrier			
	T/P Plan			

Store #: 0290

02/27/2012

PDX, Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

Page: 1

11/24/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
BUT/APAP/CAF	TAB QUA 00603254421	15	560	27.69	227.69	200.00	87.84	13.33
TOTAL FOR SELECTED DRUGS		15	560	27.69	227.69	200.00	87.84	13.33
SELECTION CRITERIA	Tx Date Range 11/24/2011 02/24/2012 Report Type: Drug Code BUTA3256 BUTA3256 Report Order: 1 GPI Number Drugs: 100 Drug Schedule Summary Only: N Canada Sched List Each Tx: N Drug Group Compnd Ingrd: Y NDC/DIN Code Zero Price: ASHP Class Patient Code Patient Group Physician Code Price Code T/P Carrier T/P Plan							

02/27/2012

 PDV Inc. PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

 Page: 1
 02/24/2011 02/27/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
HYDROCO/APAP 10-500 TAB WAT	00591054005	237	20147	1,870.62	4439.10	2,568.48	57.86	10.84
OXYCODONE 30MG TAB ACT	00228287911	130	18008	5,342.44	9013.40	3,670.96	40.73	28.24
HYDROCO/APAP 5-500M TAB WAT	00591034905	195	11979	460.03	1687.91	1,227.88	72.75	6.30
OXYCODONE 30 MG TAB MAL	00406853001	76	10818	3,581.96	5452.21	1,870.25	34.30	24.61
HYDROCO/APAP 7.5-50 TAB WAT	00591038505	151	10740	416.36	2257.46	1,841.10	81.56	12.19
DIAZEPAM 10 MG TAB WAT	00591562010	113	9744	181.92	1742.61	1,560.69	89.56	13.81
ALPRAZOLAM 1 MG TAB GRE	59762372104	98	8504	233.27	1292.79	1,059.52	81.96	10.81
OXYCODONE 15MG TAB ACT	00228287811	75	7913	1,573.65	2575.34	1,001.69	38.90	13.36
ALPRAZOLAM 0.5 MG TAB GRE	59762372004	86	6721	172.90	1168.85	995.95	85.21	11.58
METHADONE 10 MG TAB MAL	00406577101	48	6211	410.49	874.04	463.55	53.04	9.66
DIAZEPAM 5 MG TAB IVA	00172392670	72	6038	108.91	830.06	721.15	86.88	10.02
ALPRAZOLAM 0.25 MG TAB GRE	59762371904	72	4356	94.76	776.27	681.51	87.79	9.47
OXYCOD/APAP 5-325 M TAB MAL	00406051201	59	4066	149.60	648.07	498.47	76.92	8.45
HYDROCO/APAP 10-325 TAB QUA	00603388728	40	3819	370.77	1022.53	651.76	63.74	16.29
OXYCOD/APAP 10-325M TAB AMN	53746020401	38	3194	1,050.99	1887.60	836.61	44.32	22.02
CLONAZEPAM 1 MG TAB TEV	00093083310	45	3103	68.27	564.70	496.43	87.91	11.03
OXYCONTIN 80MG CR TAB PUR	59011048010	29	2594	30,940.25	33058.41	2,118.16	6.41	73.04
METHADONE 10 MG TAB ROX	00054457125	18	2508	180.83	294.32	113.49	38.56	6.30
OPANA ER 40MG TAB END	63481069370	33	2498	28,515.11	30443.49	1,928.38	6.33	58.44
LORAZEPAM 0.5 MG TAB ACT	00228205750	51	2407	57.22	519.92	462.70	88.99	9.07
OXYCODONE 15 MG TAB MAL	00406851501	20	2374	531.95	833.36	301.41	36.17	15.07
OXYCONTIN 40MG CR TAB PUR	59011044010	33	2358	14,967.23	16123.44	1,156.21	7.17	35.04
CHERATUSSIN AC SYP QUA	00603107558	14	2225	18.42	105.52	87.10	82.54	6.22
ALPRAZOLAM 0.5 MG TAB DAV	67253090111	26	1980	39.75	385.25	345.50	89.68	13.29
ALPRAZOLAM 2 MG TAB DAV	67253090350	22	1980	176.74	448.48	271.74	60.59	12.35
CLONAZEPAM 0.5MG TAB SAN	00185006310	26	1876	28.52	382.30	353.78	92.54	13.61
OXYCODONE 5MG IR TAB QUA	00603499028	28	1864	377.82	470.89	93.07	19.76	3.32
LYRICA 150MG CAP PFI	00071101668	29	1864	4,902.00	5248.84	346.84	6.61	11.96
ALPRAZOLAM 1MG TAB DAV	67253090211	20	1812	57.99	342.19	284.20	83.05	14.21
ZOLPIDEM 10MG TAB MYL	00378531005	69	1796	35.18	544.16	508.98	93.53	7.38
ZOLPIDEM 10MG TAB QUA	00603646928	61	1764	35.83	572.33	536.50	93.74	8.80
OPANA ER 20 MG TAB END	63481061770	30	1509	9,260.21	9928.00	667.79	6.73	22.26

02/27/2012

PBX, Inc. PDK PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORTPage: 2
11/24/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
HYDROCO/APAP 7.5-32 TAB MAL	00406036601	17	1504	260.46	575.09	314.63	54.71	18.51
LORAZEPAM 1 MG TAB RAN	63304077310	24	1470	33.93	281.58	247.65	87.95	10.32
LYRICA 75MG CAP PFI	00071101468	25	1452	3,816.00	4127.67	311.67	7.55	12.47
OPANA ER 30 MG TAB END	63481057170	29	1428	12,655.06	13497.63	842.57	6.24	29.05
OPANA ER 10 MG TAB END	63481067470	20	1368	4,741.21	5030.33	289.12	5.75	14.46
PROMETH/COD 6.25-10 SYP QUA	00603158558	10	1360	14.50	77.04	62.54	81.18	6.25
ENDOCET 10-325MG TAB END	60951071270	13	1188	599.74	674.91	75.17	11.14	5.78
CLONAZEPAM 0.5 MG TAB TEV	00093083210	14	1170	15.98	173.95	157.97	90.81	11.28
ALPRAZOLAM 2MG TAB DAV	67253090310	15	1155	148.60	340.53	191.93	56.36	12.80
LORAZEPAM 2 MG TAB ACT	00228206350	13	1081	50.15	194.51	144.36	74.22	11.10
HYDROCO/APAP 10-325 TAB QUA	00603388732	10	1062	91.49	209.28	117.79	56.28	11.78
HYDROMORPHON 4MG TAB ROX	00054026425	10	1026	104.03	245.11	141.08	57.56	14.11
DIAZEPAM 2 MG TAB IVA	00172392560	14	925	19.53	138.55	119.02	85.90	8.50
HYDROCO/APAP 10-650 TAB MAL	00406036101	14	889	50.17	140.53	90.36	64.30	6.45
OXYCONTIN 20MG CR TAB PUR	59011042010	17	878	3,137.66	3394.74	257.08	7.57	15.12
MORPHINE SUL 60MG E TAB MYL	00378266001	15	872	399.67	569.14	169.47	29.78	11.30
HYDROCO/APAP 7.5-50 SOL PHA	00121065516	1	800	13.24	35.90	22.66	63.12	22.66
TEMAZEPAM 30 MG CAP MYL	00378505005	21	720	65.24	249.73	184.49	73.88	8.79
OXYMORPHONE 7.5MG ER TB ACT	00228326111	13	720	1,608.33	1778.82	170.49	9.58	13.11
OXYCOD/APAP 10-325 TAB MAL	00406052301	10	706	226.20	538.98	312.78	58.03	31.28
ROXICODONE 30 MG TAB XAN	66479058210	6	672	1,630.36	1736.79	106.43	6.13	17.74
OXYCONTIN 10MG CR TAB PUR	59011041010	10	650	1,219.24	1328.28	109.04	8.21	10.90
ALPRAZOLAM 2 MG TAB GRE	59762372203	7	630	39.00	126.60	87.60	69.19	12.51
OXYCODONE 10MG IR TAB KVKT	10702005601	12	620	137.05	325.67	188.62	57.92	15.72
OXYCONTIN 60MG CR TAB PUR	59011046010	8	616	5,709.08	6056.49	347.41	5.74	43.43
APAP/CODEINE 300-30 TAB MAL	00406048401	21	615	73.76	163.78	90.02	54.96	4.29
HYDROCO/APAP 7.5-32 TAB WAT	00591320301	6	600	113.02	197.21	84.19	42.69	14.03
PHENTERMINE 37.5MG TAB MUT	53489040601	15	596	68.93	414.73	345.80	83.38	23.05
ROXICET 5-325 MG TAB ROX	00054465029	11	585	35.56	160.51	124.95	77.85	11.36
TEMAZEPAM 15 MG CAP MYL	00378401005	17	570	32.27	164.52	132.25	80.39	7.78
LYRICA 50MG CAP PFI	00071101368	6	544	1,422.24	1528.68	106.44	6.96	17.74
OXYCONTIN 30MG CR TAB PUR	59011043010	7	532	2,696.43	2835.87	139.44	4.92	19.92

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02/27/2012

 PCK PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

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02/27/2012 02/27/2012

Drug Name		NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
PHENOBARB 15 MG	TAB WES	00143144510	4	510	23.42	56.80	33.38	58.77	8.35
CONCERTA 36MG	TAB MCN	50458058601	11	510	3,005.16	3135.83	130.67	4.17	11.88
APAP/CODEINE 300-60	TAB MAL	00406048505	6	510	104.04	156.78	52.74	33.64	8.79
METHADONE 5 MG	TAB MAL	00406575501	7	483	21.80	64.92	43.12	66.42	6.16
ZOLPIDEM 5 MG	TAB MYL	00378530501	18	475	13.28	98.19	84.91	86.48	4.72
MORPHINE SUL 20 MG	CAP ACT	00228350211	12	472	1,619.96	1885.48	265.52	14.08	22.13
OKYCOD/APAP 7.5-325	TAB MAL	00406052201	6	458	146.82	198.93	52.11	26.20	8.69
TESTIM 1%(50 MG)	PCK GEL AU	66887000105	3	450	899.69	959.87	60.18	6.27	20.06
ATIVAN 2MG	TAB VAL	64455006501	5	450	2,423.50	2744.33	320.83	11.69	64.17
OXYCODONE 20MG/ML	CON LAN	00527142636	7	435	1,105.24	767.64	337.60	43.98	48.23
MORPHINE SUL 15MG E	TAB WAT	42858080101	9	430	88.30	160.45	72.15	44.97	8.02
LORTAB 10	TAB UCB	50474091050	4	420	608.50	672.06	63.56	9.46	15.89
ENDOCET 10-650MG	TAB END	60951079770	4	404	181.14	195.75	14.61	7.46	3.65
MORPHINE SUL ER 15 MG	TAB	00406831501	9	372	149.72	132.45	17.27	13.04	1.92
OXYCODONE 5MG	TAB KVK	10702001801	4	370	41.06	99.45	58.39	58.71	14.60
OXYCODONE 30MG	TAB CAR	57664022488	4	366	157.16	180.23	23.07	12.80	5.77
PHENOBARB 30 MG	TAB WES	00143145010	6	360	20.87	28.35	7.48	26.38	1.25
LYRICA 100MG	CAP PFI	00071101568	4	360	917.58	966.95	49.37	5.11	12.34
HYD POLST-CH LOR PO	LIQ PAR	49884023533	2	360	169.31	183.73	14.42	7.85	7.21
DEMEROL 100MG	TAB SAN	00024033704	3	360	986.76	1036.37	49.61	4.79	16.54
HYDROMORPHON 2MG	TAB LAN	00527135301	3	344	29.34	73.73	44.39	60.21	14.80
VYVANSE 60MG	CAP SHI	59417010610	11	330	1,659.31	1777.05	117.74	6.63	10.70
MORPHINE SUL 20 MG/	SOL LAN	00527142536	14	330	164.27	238.12	73.85	31.01	5.28
METHYLPHENID 20MG ER	TB MAL	00406147301	4	330	82.42	299.91	217.49	72.52	54.37
ZOLPIDEM CR 12.5MG	TAB	10370011610	11	324	962.73	1355.81	393.08	28.99	35.73
OXYMORPHONE 15MG ER	TAB ACT	00228326211	5	316	1,287.44	1350.30	62.86	4.66	12.57
DIPHEN/ATROP 2.5MG	TAB GRE	59762106101	4	310	39.43	96.97	57.54	59.34	14.39
ALPRAZOLAM 0.25 MG	TAB DAV	67253090011	7	304	5.06	90.29	85.23	94.40	12.18
METHYLPHENID 54MG E	TAB WAT	00591271801	10	300	1,548.60	1660.58	111.98	6.74	11.20
CARISOPRODOL 350 MG	TAB QUA	00603258228	5	300	43.23	68.16	24.93	36.58	4.99
ANDROGEL 1%(50MG)	GEL ABB	00051845030	2	300	626.11	663.05	36.94	5.57	18.47
ANDROGEL PUMP 1%	GEL ABB	00051848888	2	300	624.82	666.69	41.87	6.28	20.94

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02/27/2012

 PDV, INC. - PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

Page 4

11/21/2011 02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
NUCYNTA 50MG	TAB JAN 50458082004	6	290	585.64	627.50	41.86	6.67	6.98
MORPHINE SUL 15MG E	TAB MYL 00378265801	5	288	55.70	91.06	35.36	38.83	7.07
AMPHETAMINE 20MG ER	CAP GLO 00115133101	9	280	1,247.49	1347.38	99.89	7.41	11.10
OXYCOD/APAP 10-650M	TAB AMN 53746020601	4	272	112.13	122.60	10.47	8.54	2.62
LYRICA 200MG	CAP PFI 00071101768	5	270	710.09	746.23	36.14	4.84	7.23
CLONAZEPAM 2 MG	TAB ACT 00228300550	5	270	8.80	51.24	42.44	82.83	8.49
AMPHETAMINE 10MG	TAB TEV 00555097202	7	270	286.44	352.93	66.49	18.84	9.50
ALPRAZOLAM 2 MG	TAB GRE 59762372201	2	270	15.41	45.54	30.13	66.16	15.07
CLORAZ DIPOT 3.75 M	TAB MYL 00378003001	4	260	32.36	81.49	49.13	60.29	12.28
HYDROCO/APAP 5-325M	TAB MAL 00406036501	4	255	36.94	69.56	32.62	46.89	8.16
FOCALIN XR 20MG	CAP NOV 00078043205	4	240	1,309.72	1386.12	76.40	5.51	19.10
FENTANYL 25MCG/HR	DIS MYL 00378912198	18	235	1,412.21	1885.07	472.86	25.08	26.27
NUCYNTA ER 100 MG	TAB JAN 50458086101	5	234	1,021.12	1092.24	71.12	6.51	14.22
PENTAZOCINE/ NALOXO	TAB GAV 43386068001	4	210	206.45	262.22	55.77	21.27	13.94
LUNESTA 3MG	TAB SUN 63402019310	9	210	1,336.89	1453.95	117.06	8.05	13.01
BUT/ASA/CAFF	TAB WES 00143178501	3	210	21.68	69.79	48.11	68.94	16.04
AMPHETAMINE 30MG	TAB TEV 00555097402	7	210	287.07	264.15	22.92-	8.68-	3.27-
XANAX 0.5 MG	TAB PFI 00009005501	1	200	362.09	378.68	16.59	4.38	16.59
MORPHINE SUL 30MG ER	TB MAL 00406833001	4	198	188.20	124.40	63.80-	51.29-	15.95-
FENTANYL 50MCG/HR	DIS ACT 67767012118	18	185	1,372.66	2351.88	979.22	41.64	54.40
MORPHINE SUL 100 MG	TAB MYL 00378266101	3	182	655.97	171.23	484.74-	283.09-	161.58-
VYVANSE 70MG	CAP SHI 59417010710	6	180	906.04	960.82	54.78	5.70	9.13
VYVANSE 40MG	CAP SHI 59417010410	6	180	895.46	956.48	61.02	6.38	10.17
PHENOBARB 97.2 MG	TAB QUA 00603516821	3	180	15.84	35.85	20.01	55.82	6.67
OXYMORPHONE HCL 5MG	TAB ROX 00054028325	2	180	339.40	434.68	95.28	21.92	47.64
METHYLPHENID 36MG E	TAB WAT 00591271701	5	180	888.48	874.43	14.05-	1.61-	2.81-
METHYLPHENID 10MG	TAB WAT 00591588301	3	180	21.38	47.93	26.55	55.39	8.85
KADIAN 30MG CR	CAP ACT 46987032511	3	180	886.67	974.28	87.61	8.99	29.20
HYDROCOD/HOM 5-1.5/	SYP HI- 50383004316	1	180	15.18	25.95	10.77	41.50	10.77
BUT/ASA/CAFF	CAP WAT 00591321901	2	180	48.00	96.47	48.47	50.24	24.24
SUBOXONE 8-2MG	SUB REC 12496130602	3	172	1,220.00	1288.80	68.80	5.34	22.93
OXYCONTIN 15MG CR	TAB PUR 59011041510	3	168	471.86	512.22	40.36	7.88	13.45

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02/27/2012

 PDV Tag: PDV PHARMACY SYSTEM
 MEDICINE SHOPPE #0290
 DRUG MOVEMENT REPORT

 Page 5
 10/24/2011-02/21/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
FENTANYL 50MCG/HR	DIS MYL 00378912298	13	155	1,665.91	1944.89	278.98	14.34	21.46
ZAILEPLON 10MG	CAP ASC 67877021101	5	150	37.38	125.50	88.12	70.22	17.62
KADIAN 60MG CR	CAP ACT 46987032611	3	150	1,479.75	1618.80	139.05	8.59	46.35
FENTANYL 25 MCG/HR	DIS ACT 67767012018	14	150	663.90	1065.97	402.07	37.72	28.72
CARISOPRODOL 350 MG	TAB SUN 62756044605	2	150	10.15	38.63	28.48	73.73	14.24
AMPHETAMINE 20MG ER	CAP TEV 00555078802	4	150	732.10	707.63	24.47-	3.46-	6.12-
ADDERALL XR 20 MG	CAP SHI 54092038701	3	150	955.67	1007.33	51.66	5.13	17.22
MORPHINE SUL 30 MG	TAB RHO 42858080201	2	144	126.38	137.72	11.34	8.23	5.67
KADIAN 20MG CR	CAP ACT 46987032211	7	140	648.53	710.28	61.75	8.69	8.82
METHADONE 5 MG/5ML	SOL ROX 00054355563	14	129	8.07	65.62	57.55	87.70	4.11
DIPHEN/ATROP 2.5MG	TAB MYL 00378041510	3	127	13.29	35.46	22.17	62.52	7.39
ZOLPIDEM 10 MG	TAB MYL 00378531001	4	120	2.44	18.04	15.60	86.47	3.90
VIMPAT 100 MG	TAB SCH 00131247835	2	120	857.96	915.18	57.22	6.25	28.61
PROMETH VC/ CODEINE	SYP QUA 00603158858	1	120	10.50	11.85	1.35	11.39	1.35
NUCYNIA 100MG	TAB JAN 50458084004	1	120	376.83	400.42	23.59	5.89	23.59
METHYLIN ER 20MG	TAB MAL 00406145101	3	120	28.25	103.55	75.30	72.72	25.10
LYRICA 300MG	CAP PFI 00071101868	2	120	314.37	340.31	25.94	7.62	12.97
LORTAB 10	TAB UCB 50474091001	2	120	192.59	279.90	87.31	31.19	43.66
HYDROCO/APAP 5-325M	TAB QUA 00603389028	2	120	21.64	50.52	28.88	57.17	14.44
FENTANYL 100MCG/H	DIS ACT 67767012318	12	120	1,954.07	2761.13	807.06	29.23	67.25
DRONABINOL 2.5MG	CAP PAR 49884086702	2	120	440.62	459.96	19.34	4.20	9.67
DEXMETHYLPH 10MG	TAB TEV 00093527701	4	120	134.40	142.91	8.51	5.95	2.13
AMPHETAMINE 20MG	TAB SAN 00185040101	2	120	129.75	172.90	43.15	24.96	21.58
MORPHINE SUL 100 MG	TAB END 60951065870	2	114	142.60	129.07	13.53-	10.48-	6.77-
OXYCODONE 30 MG	TAB ACT 52152021502	1	112	38.61	49.96	11.35	22.72	11.35
NUCYNIA 75MG	TAB JAN 50458083004	2	112	264.64	283.58	18.94	6.68	9.47
HYDROMORPHON 2MG	TAB RHO 42858030101	1	112	47.28	23.97	23.31-	97.25-	23.31-
OXAZEPAM 15 MG	CAP ACT 00228206910	2	108	103.75	62.71	41.04-	65.44-	20.52-
OXYMORPHONE HCL 10M	TAB ROX 00054028425	2	100	347.75	375.44	27.69	7.38	13.85
DIPHEN/ATROP 2.5MG	TAB MYL 00378041501	1	100	43.01	14.21	28.80-	202.67-	28.80-
ADDERALL XR 15 MG	CAP SHI 54092038501	4	96	612.10	649.90	37.80	5.82	9.45
VYVANSE 20MG	CAP SHI 59417010210	3	90	447.73	476.10	28.37	5.96	9.46

02/27/2012

PDX Tag PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

12/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
OXYMORPHONE HCL 5MG TAB END	60951079470	1	90	204.40	219.86	15.46	7.03	15.46
OXAZEPAM 15MG CAP SAN	00781281001	1	90	34.58	41.50	6.92	16.67	6.92
OXAZEPAM 15 MG CAP IVA	00172480560	1	90	31.49	41.50	10.01	24.12	10.01
MORPHINE SUL 60 MG ER TAB M	00406838001	2	90	103.87	58.78	45.09-	76.71-	22.55-
METHYLPHENID 18MG E TAB WAT	00591271501	3	90	424.62	432.24	7.62	1.76	2.54
FOCALIN XR 10MG CAP NOV	00078043105	3	90	473.76	489.06	15.30	3.13	5.10
ESTAZOLAM 2 MG TAB TEV	00093013001	3	90	23.73	38.10	14.37	37.72	4.79
DEKMETHYLPH 5 MG TAB TEV	00093527601	2	90	68.96	70.48	1.52	2.16	0.76
CLONAZEPAM 2 MG TAB ACT	00228300511	1	90	3.03	15.00	11.97	79.80	11.97
APAP/CODEINE 300-15 TAB QUA	00603233721	3	90	10.74	25.02	14.28	57.07	4.76
AMBIEN CR 12.5MG TAB SAN	00024552131	3	90	550.30	576.70	26.40	4.58	8.80
ADDERALL XR 10 MG CAP SHI	54092038301	3	90	573.09	607.41	34.32	5.65	11.44
HYDROCO/APAP 7.5-75 TAB MAL	00406036005	4	88	2.90	55.74	52.84	94.80	13.21
MORPHINE SUL 15MG IR TB ROX	00054023525	2	86	5.93	11.41	5.48	48.03	2.74
KADIAN 10MG CR CAP ACT	46987041011	6	84	344.36	390.48	46.12	11.81	7.69
LORAZEPAM 2 MG/ML CON ROX	00054353244	5	81	80.31	107.92	27.61	25.58	5.52
FENTANYL 100MCG/H DIS MYL	00378912498	8	80	1,917.52	2120.21	202.69	9.56	25.34
PROVIGIL 200 MG TAB CEP	63459020101	3	75	1,355.83	2071.91	716.08	34.56	238.69
PHENTERMINE 37.5MG TAB LAN	00527144501	3	75	11.27	92.95	81.68	87.88	27.23
FENTANYL 75MCG/HR DIS ACT	67767012218	8	65	860.80	1404.20	543.40	38.70	67.93
FENTANYL 75MCG/HR DIS MYL	00378912398	7	65	1,175.98	1356.62	180.64	13.32	25.81
MORPHINE SUL 100 MG SR TAB	00406839001	2	60	41.07	98.83	57.76	58.44	28.88
METHYLIN 5MG TAB MAL	00406112101	1	60	14.86	8.97	5.89-	65.66-	5.89-
METHYLPHENID 5 MG TAB UCB	53014053107	1	60	20.50	15.98	4.52-	28.29-	4.52-
METHYLPHENID 10 MG TAB UCB	53014053007	2	60	30.80	34.06	3.26	9.57	1.63
LUNESTA 2MG TAB SUN	63402019110	2	60	382.14	409.25	27.11	6.62	13.56
KADIAN 100MG CR CAP ACT	46987032411	1	60	985.22	1079.58	94.36	8.74	94.36
HYDROCO/APAP 7.5-50 TAB MAL	00406035805	1	60	2.35	10.55	8.20	77.73	8.20
DAYTRANA 30MG/9HR DIS NOV	68968555503	2	60	344.88	360.93	16.05	4.45	8.03
CONCERTA 54MG TAB MCN	50458058701	2	60	385.27	412.48	27.21	6.60	13.61
CLORAZ DIPOT 7.5 MG TAB TAR	51672404302	2	60	25.14	27.90	2.76	9.89	1.38
CLONAZEPAM 0.5MG TAB QUA	00603294832	1	60	1.46	3.75	2.29	61.07	2.29

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CAH_FEDWV_00000645

P-42116_00152

02/27/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
CDP/AMITRIP 5-12.5M TAB MYL	00378021101	2	60	36.82	43.50	6.68	15.36	3.34
AMPHETAMINE 5MG ER CAP GLO	00115132801	2	60	292.84	306.22	13.38	4.37	6.69
AMPHETAMINE 30MG ER CAP TEV	00555078902	1	60	292.84	304.77	11.93	3.91	11.93
AMPHETAMINE 10MG ER CAP GLO	00115132901	2	60	269.71	294.01	24.30	8.27	12.15
AMPHETAMINE 15MG TAB TEV	00555077702	1	55	55.82	74.89	19.07	25.46	19.07
ZALEPLON 5MG CAP COR	64720032210	2	50	13.98	67.45	53.47	79.27	26.74
ASCOMP/COD 30MG CAP BRE	51991007401	1	50	26.71	61.95	35.24	56.88	35.24
MORPHINE SUL 20MG/M SOL ROX	00054040444	2	45	24.97	35.45	10.48	29.56	5.24
PROVIGIL 100 MG TAB CEP	63459010101	2	42	534.18	742.21	208.03	28.03	104.02
EXALGO 8MG SR TAB MAL	23635040801	2	42	367.19	415.57	48.38	11.64	24.19
TUSSICAPS 10-8MG CAP ECR	23635010820	2	40	160.40	179.56	19.16	10.67	9.58
HYDROCO/APAP 7.5-65 TAB MAL	00406035901	2	40	1.74	14.89	13.15	88.31	6.58
SUBOXONE 8-2MG FILM MIS REC	12496120803	3	35	221.67	237.11	15.44	6.51	5.15
METHYLPHENID 10MG TAB MAL	00406114401	1	30	2.58	11.36	8.78	77.29	8.78
METADATE CD 40 MG CAP UCB	53014058207	1	30	191.08	202.25	11.17	5.52	11.17
METADATE CD 10 MG CAP UCB	53014057907	1	30	139.32	148.35	9.03	6.09	9.03
FOCALIN XR 5MG CAP NOV	00078043005	1	30	160.70	170.47	9.77	5.73	9.77
FOCALIN XR 35MG CAP NOV	00078060905	1	30	227.30	194.64	32.66-	16.78-	32.66-
FENTANYL 12MCG/HR DIS MYL	00378911998	3	30	288.56	482.61	194.05	40.21	64.68
DEXTROAMPHET 15 MG ER CP CO	64720032909	1	30	206.09	143.46	62.63-	43.66-	62.63-
*0.5BIEST1.0/PROGEST100/	51927171400	1	30	2.13	30.00	27.87	92.90	27.87
CLONAZEP ODT 0.5 MG TAB TEV	00555009696	1	30	24.74	30.19	5.45	18.05	5.45
CHLORDIAZEP 10MG CAP TEV	00555003302	1	30	2.10	8.66	6.56	75.75	6.56
AMPHETAMINE 30MG ER CAP GLO	00115133301	1	30	140.39	175.98	35.59	20.22	35.59
AMPHETAMINE 5MG TAB SAN	00185008401	1	30	33.44	41.29	7.85	19.01	7.85
AMPHETAMINE 10MG ER CAP TEV	00555078702	1	30	153.29	193.95	40.66	20.96	40.66
AMPHETAMINE 10MG TAB SAN	00185011101	1	30	37.63	38.97	1.34	3.44	1.34
ADDERALL XR 30 MG CAP SHI	54092039101	1	30	187.78	202.47	14.69	7.26	14.69
ADDERALL 15MG TAB TEV	00555076602	1	30	112.08	120.24	8.16	6.79	8.16
FENTORA 100MCG TAB CEP	63459054128	1	28	678.02	727.90	49.88	6.85	49.88
DURAGESIC 100MCG/H DIS JAN	50458009405	2	20	1,640.57	1732.72	92.15	5.32	46.08
DURAGESIC 50MCG/HR DIS JAN	50458009205	1	15	576.81	615.92	39.11	6.35	39.11

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CAH_FEDWV_00000646

P-42116_00153

02/27/2012

PDX, Inc. PDX PHARMACY SYSTEM
MEDICINE SHOPPE #0290
DRUG MOVEMENT REPORT

11/24/2011-02/24/2012

Drug Name	NDC Number	#Rx	#Units	Cost	Retail	\$MRG	%MRG	AVG \$
DURAGESIC 25MCG/HR DIS JAN	50458009105	1	15	348.09	371.65	23.56	6.34	23.56
TESTOST CYP 200MG/M INJ WAT	00591322379	1	10	84.49	94.49	10.00	10.58	10.00
OXYCOD/APAP 10-650M TAB MYL	00378710801	1	10	12.55	9.80	2.75-	28.06-	2.75-
AMBIEN CR 6.25MG TAB SAN	00024550131	1	10	60.31	71.16	10.85	15.25	10.85
DIASTAT ACDL 5-10MG GEL VAL	00187065820	2	9	2,716.04	2844.29	128.25	4.51	64.13
TESTOST CYP 200MG/M INJ PAD	00574082001	3	8	151.40	153.77	2.37	1.54	0.79
DEPO-TESTOST 200MG/ INJ PFI	00009041701	1	2	44.50	49.59	5.09	10.26	5.09
DIASTAT ACDL 12.5-20MG GEL	00187065920	1	1	301.78	317.98	16.20	5.09	16.20
TOTAL FOR SELECTED DRUGS		3116	224781	218,335.38	264325.93	45,990.55	17.40	14.76

SELECTION CRITERIA Tx Date Range 11/24/2011 02/24/2012 Report Type:
Drug Code Report Order: 1
GPI Number Drugs: 9999
Drug Schedule Summary Only: N
Canada Sched List Each Tx: N
Drug Group Compound Ingrd: Y
NDC/DIN Code Zero Price:
ASHP Class
Patient Code
Patient Group
Physician Code
Price Code
T/P Carrier
T/P Plan

Use Select Criteria From This Screen: Y

Rx Number	Starting	Ending	Refills Auth	Starting	Ending
Date Written	2000000	5999999	Refills Rem		
First Filled			Ordered Qty		
Rx Expires			Qty Left		
Stop Date			Days Supply		
Follow Up			Qty Owed		
Merge			Deactivate		
Rx Group			Status		
Disease Code			SUBS Drug		
SIG			AutoFill Qty		
RxQue Number					

Phone: Compound: N Allow AutoFill:
Transfer: Rx Updated: AutoFill No Refs:
RxDAW:

From: Kave, Jesse
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 6:01:26 PM
Attachments: Picture_728.jpg
Picture_729.jpg
Picture_730.jpg
Picture_731.jpg
Picture_732.jpg
Picture_733.jpg
Picture_734.jpg

Kim,

See attached top doctor's report for Oxycodones.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

Thanks,

JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.

I appreciate the information.

Kim

From: Kave, Jesse
Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Friday, February 10, 2012 4:17 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

Jesse

Sent from my iPhone

On Feb 10, 2012, at 11:39 AM, "Howenstein, Kim" <kim.howenstein@cardinalhealth.com> wrote:

Yes,
Thank you.

From: Kave, Jesse
Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim

Can I remove your name and forward to customer?

Jesse

Sent from my iPhone

On Feb 9, 2012, at 4:15 PM, "Howenstein, Kim"

<kim.howenstein@cardinalhealth.com> wrote:

Good Afternoon Jesse,

I need to request complete dispense data for all controlled and monitored substances this pharmacy dispenses without patient information and in excel format please. Three months will be sufficient. In addition to complete dispense data for all drug families, I also need to know the names and DEA#s of those prescribing Oxymorphone, Oxycodone and Hydrocodone, along with the draw area and whether the patients are local.

Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,

Kim

Kim Howenstein

Specialist, Quality Assurance | QRA

7000 Cardinal Place

Dublin, OH 43017

Phone: (614) 757-5524

Fax: (614) 553-6147

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
		THORARINSSON, BJORN	1	2.21	13.50	\$11.29	83.63	\$11.29
		TOWER, MARK	1	76.06	54.45	\$21.61-	39.69-	\$21.61-
		TSAI, PETER	1	28.85	46.42	\$17.57	37.85	\$17.57
		TURNER, ROBERT E	1	1.10	5.63	\$4.53	80.46	\$4.53
		TWILLIE, TWYLA	2	80.02	150.45	\$70.43	46.81	\$35.22
		WALLACE, JANET	3	104.87	150.26	\$45.39	30.21	\$15.13
		WEBB, DELENO H	313	43178.84	51391.71	\$8,212.87	15.98	\$26.24
		WERTHAMMER, MATTHEW	1	3.31	24.49	\$21.18	86.48	\$21.18
		WHITMORE, DAVID J	1	37.56	50.15	\$12.59	25.10	\$12.59
TOTAL PRESCRIPTIONS			582	73726.98	86483.58	\$12,756.60	14.75	\$21.92

TOTAL RECORDS LISTED -- 65

SELECTION CRITERIA	Tx Date Range		11/24/2011	02/24/2012
	Physician Code			
	Physician Group			
	Physician Type			
	T/P Carrier			
	T/P Plan			
	List Each Tx: N	Summary Only: N	New/Refill:	
Drug Code	Starting	Ending	StorageCell	Starting Ending
NDC/DIN	OXYC1	OXYI5	Pack Size	
Drug STD			STD Pack	
SUBS Code			Drug Unit	
GPI			Schedule	
Gen Name			Canada Sched	
			Orig Sched	
TallMan Nm			DESI	
			Drug Group	
Carrier			Sub Group	
T/P Plan			Category	
T/P Group			Multi	
Drug Lot#			TherClass	
Manufact.			Ther Equiv	
Item #				
Warehouse	Reportable	Status	UPC	
Injectable	Written	StoreGen	Disp Sys	

Oxycodone ALL strengths

Code: WEBBD1
Name: WEBB, DELENO H
WEBB, DELENO H
Comment: >20040923 CALL 1-800-599-878*0 FOR PATIENT REFILLS
Address: 10 6TH AVENUE WEST SUITE 300
Address:
City, ST: HUNTINGTON, WV
ZipCode: 25701
Phone #: (304) 525-9355,
Fax #: (304) 522-0835,
DEA #: AW4345167
DEA Suf:
NPI #: 1942373923
ST/PV #: 91111115
T/P #:
Doctor:
Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Code: OZTUJAH1
 Name: OZTURK, AHMET
 OZTURK, AHMET
 Comment: >DIRECT LINE 526-2177 * REFILL LINE 781-0204
 Address: 1623 13TH AVE
 Address:
 City, ST: HUNTINGTON, WV
 ZipCode: 25701 0000
 Phone #: 526-2243,
 Fax #: 526-2174,
 DEA #: BO1101512
 DEA Suf:
 NPI #: 1942206529
 ST/PV #: 9111115
 T/P #:
 Doctor:
 Group:
 Probate:
 DAW:
 Degree:
 Specialty:
 Last: 02/27/2012

COCA: NUNAN, PATRICK
 Name: NUNAN, PATRICK
 NUNAN

, PATRICK

Comment:
 Address: 1102 POPLAR STR
 Address:
 City,ST: KENOVA , WV
 ZipCode: 25530
 Phone #: (304)453-5458,
 Fax #: (304)453-5459,
 DEA #: BN0137768
 DEA Suf:
 NPI #: 1780648345
 ST/PV #:
 T/P #:
 Doctor:

Group:
 Probate:
 DAW:
 Degree:
 Specialty:
 Last: 02/22/2012

Code: MACFARLAND
Name: MACFARLAND, DAWN
MACFARLAND

, DAWN

Comment:

Address: 2674 5TH AVE, SUITE 2

Address:

City,ST: HUNTINGTON

, WV

ZipCode: 25702

Phone #: (304) 523-5555,

Fax #: 523-2220,

DEA #: BM6315469

DEA Suf:

NPI #: 1881623155

ST/PV #:

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Code: MEMO1
Name: MEMON, REHAN
MEMON, REHAN
Comment: 1053433938=NPI DIRECT LINE *526-2177
Address: 1623 13TH AVE
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25701
Phone #: (304)526-2243,
Fax #: (304)526-2174,
DEA #: FM1057492
DEA Suf:
NPI #: 1053433938
ST/PV #: 9111115
T/P #: FM1057492
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Physician Name			# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name		Cost	Retail	Patient		Filled
JENNINGS, TUCKER	2			2.94	10.30	\$7.36	71.46	\$3.68
KIM, JEFFERY	1			18.78	24.75	\$5.97	24.12	\$5.97
KIMMEY, GERRIT A	6			3052.00	3218.59	\$166.59	5.18	\$27.77
KURUCZ, JANE A	1			11.90	12.24	\$0.34	2.78	\$0.34
MACFARLAND, DAWN	9			265.21	402.54	\$137.33	34.12	\$15.26
MAIERS, KANE	1			1.10	15.95	\$14.85	93.10	\$14.85
MAJESTRO, TONY	1			1.47	11.69	\$10.22	87.43	\$10.22
FARESI, MARIANO	2			9.78	35.12	\$25.34	72.15	\$12.67
MEADOWS, CHARLES	2			56.34	85.00	\$28.66	33.72	\$14.33
MEMON, REHAN	27			2403.01	2601.09	\$198.08	7.62	\$7.34
MILLER, KIRT	1			1.10	15.95	\$14.85	93.10	\$14.85
MILLER, S	1			1.47	7.93	\$6.46	81.46	\$6.46
MILLER, STEPHEN	2			2.39	13.55	\$11.16	82.36	\$5.58
MITCHELL, SCOTT	1			17.86	20.31	\$2.45	12.06	\$2.45
MORGAN, CRAIG	1			1.10	7.01	\$5.91	84.31	\$5.91
NEGINHAL, VIVEK	1			2.21	16.61	\$14.40	86.69	\$14.40
NUNAN, PATRICK	9			169.64	400.78	\$231.14	57.67	\$25.68
OZTURK, AHMET	119			19641.52	21487.10	\$1,845.58	8.59	\$15.51
PARIKH, JEANNINE	1			21.23	20.59	\$0.64-	3.11-	\$0.64-
PATICK, DAVID L	2			8.84	20.00	\$11.16	55.80	\$5.58
PINSON, CYNTHIA	2			6.63	15.73	\$9.10	57.85	\$4.55
SAVORY, LINDA	5			123.72	310.58	\$186.86	60.16	\$37.37
SAXE, TIMOTHY	3			1714.68	1878.34	\$163.66	8.71	\$54.55
SEHGAL, RAJESH	1			2.03	5.14	\$3.11	60.51	\$3.11
SHARMA, SANJEEV	2			56.34	130.08	\$73.74	56.69	\$36.87
SILBERMINS, DAMIAN	1			1.84	7.69	\$5.85	76.07	\$5.85
SNYDER, RUSSELL	3			128.23	549.85	\$421.62	76.68	\$140.54
TACKETT, EVA	1			31.85	42.50	\$10.65	25.06	\$10.65

From: Kave, Jesse
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 5:52:29 PM
Attachments: Picture 722.jpg
Picture 723.jpg
Picture 724.jpg
Picture 725.jpg
Picture 726.jpg
Picture 727.jpg

Kim,
See top doctors for Oxymorphone !

Thanks,
JESSE KAVE
CARDINAL HEALTH
PHARMACY BUSINESS CONSULTANT
jesse.kave@cardinalhealth.com
Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Thursday, February 16, 2012 12:47 PM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Thursday, February 16, 2012 11:48 AM
To: Howenstein, Kim
Cc: Emma, Douglas
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,
Med Shoppe Huntington WV is sending oxy's product order in error back today UPS next day air MRA#223593 so Wheeling should have them in house by tomorrow.

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Cell 304-926-4337
Fax 614-553-9508

From: Howenstein, Kim
Sent: Tuesday, February 14, 2012 10:03 AM
To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

I think we should be ok here Jesse – if it is determined by Doug Emma that he would like to see data I will certainly communicate that to you.
I appreciate the information.

Kim

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Sent: Monday, February 13, 2012 4:17 PM
To: Howenstein, Kim
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

As soon as Joe has the MRA number I will send it to you! As I explained earlier he was trying to get a particular brand of oxy which was subbed then he ordered the correct one he needed do to mfg supply issues. He is returning 72 bottles of the wrong brand so will that suffice enough to answer our questions or will you still need the added data. I told Joe in the future to at least advise us before proceeding with such a large purchase and as to the reason for it.

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Fax 614-553-9508

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To: Kave, Jesse
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Thank you

From: Kave, Jesse
Sent: Friday, February 10, 2012 3:56 PM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim,

Joe has put a request in for 72x100 for pick up of the oxy condone.

Jesse

Sent from my iPhone

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Yes,
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Sent: Friday, February 10, 2012 11:24 AM
To: Howenstein, Kim
Subject: Re: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760

Kim

Can I remove your name and forward to customer?

Jesse

Sent from my iPhone

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Please know that orders for Oxycodone will remain in hold status until data is received and analyzed.

Thank you,
Kim

Kim Howenstein
Specialist, Quality Assurance | QRA
7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

Physician Name		# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient		Filled
		MEMON, REHAN	6	685.93	730.92	\$44.99	6.16 \$7.50
		OZTURK, AHMET	16	2645.09	2974.95	\$329.86	11.09 \$20.62
		WEBB, DELENO H	1	456.30	453.23	\$3.07-	0.68- \$3.07-
TOTAL PRESCRIPTIONS		23	3787.32	4159.10	\$371.78	8.94	\$16.16

TOTAL RECORDS LISTED -- 3

SELECTION CRITERIA	Tx Date Range		11/24/2011	02/24/2012
	Physician Code			
	Physician Group			
	Physician Type			
	T/P Carrier			
	T/P Plan			
	List Each Tx: N		Summary Only: N	New/Refill:
Drug Code	Starting	Ending		
NDC/DIN	OXYM10	OXYM75		
Drug STD			StorageCell	Starting Ending
SUBS Code			Pack Size	
GPI			STD Pack	
Gen Name			Drug Unit	
			Schedule	
			Canada Sched	
			Orig Sched	
TallMan Nm			DESI	
			Drug Group	
Carrier			Sub Group	
T/P Plan			Category	
T/P Group			Multi	
Drug Lot#			TherClass	
Manufact.			Ther Equiv	
Item #				
Warehouse	Reportable	Status	UPC	
Injectable	Written	StoreGen	Disp Sys	

Opana generic

Code: OZTUAH1
Name: OZTURK, AHMET

#Px: 4112

SPX:

545896

OZTURK

, AHMET

Comment: >DIRECT LINE 526-2177

* REFILL LINE 781-0204

Address: 1623 13TH AVE

Address:

City, ST: HUNTINGTON

, WV

Group:

Probate:

ZipCode: 25701 0000

DAW:

Phone #: 526-2243,

Degree:

Fax #: 526-2174,

Specialty:

DEA #: B01101512

Last: 02/27/2012

DEA Suf:

NPI #: 1942206529

ST/PV #: 9111115

T/P #:

Doctor:

Code: WEBBD1

Name: WEBB, DELENO H

#BX: 553

\$BX: \$72355-84

Case 3:17-cv-01362 Document 1516-19 Filed 01/13/22 Page 170 of 180 PageID #: 78016

WEBB

, DELENO

H

Comment:>20040923 CALL 1-800-599-878*0 FOR PATIENT REFILLS

Address: 10 6TH AVENUE WEST SUITE 300

Address:

City,ST: HUNTINGTON

, WV

ZipCode: 25701

Phone #: (304)525-9355,

Fax #: (304)522-0835,

DEA #: AW4345167

DEA Suf:

NPI #: 1942373923

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Code: MEADCH1
Name: MEADOWS, CHARLES

MEADOWS, CHARLES

Comment:

Address: 1600 MEDICAL CENTER DRIVE

Address:

City, ST: HUNTINGTON, WV

ZipCode: 25701

Phone #: (304) 691-1788, (304) 691-1000

Fax #: (304) 691-1694,

DEA #: BM7311498

DEA Suf:

NPI #: 1750346318

ST/PV #:

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/24/2012

Code: MEMO1
Name: MEMON, REHAN
MEMON, REHAN
Comment: 1053433938=NPI DIRECT LINE *526-2177
Address: 1623 13TH AVE
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25701
Phone #: (304)526-2243,
Fax #: (304)526-2174,
DEA #: FM1057492
DEA Suf:
NPI #: 1053433938
ST/PV #: 9111115
T/P #: FM1057492
Doctor:

Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient	Filled
MEADOWS, CHARLES	3		2043.53	2156.50	\$112.97	5.24 \$37.66
MEMON, REHAN	5		1143.97	1207.43	\$63.46	5.26 \$12.69
OZTURK, AHMET	12		3012.86	3153.02	\$140.16	4.45 \$11.68
WEBB, DELENO H	92		48971.23	52382.50	\$3,411.27	6.51 \$37.08
TOTAL PRESCRIPTIONS	112		55171.59	58899.45	\$3,727.86	6.33 \$33.28

TOTAL RECORDS LISTED -- 4

SELECTION CRITERIA Tx Date Range 11/24/2011 02/24/2012
 Physician Code
 Physician Group
 Physician Type
 T/P Carrier
 T/P Plan
 List Each Tx: N Summary Only: N New/Refill:

Drug Code	Starting	Ending	StorageCell
NDC/DIN	OPAN10	OPAN75	Pack Size
Drug STD			STD Pack
SUBS Code			Drug Unit
GPI			Schedule
Gen Name			Canada Sched
TallMan Nm			Orig Sched
Carrier			DESI
T/P Plan			Drug Group
T/P Group			Sub Group
Drug Lot#			Category
Manufact.			Multi
Item #			TherClass
			Ther Equiv

Warehouse	Reportable	Status	UPC
Injectable	Written	StoreGen	Disp Sys

Opana brand

From: Kave, Jesse
To: Howenstein, Kim
Cc: Farrell, Daniel (PD)
Subject: RE: T AND J ENTERPRISES INC MEDICINE SHOPPE #0290 - BT5541760
Date: Monday, February 27, 2012 6:23:19 PM
Attachments: [Picture 735.jpg](#)
[Picture 736.jpg](#)
[Picture 737.jpg](#)
[Picture 738.jpg](#)
[Picture 739.jpg](#)
[Picture 740.jpg](#)
[Picture 741.jpg](#)
[Picture 742.jpg](#)
[Picture 743.jpg](#)
[Picture 744.jpg](#)
[Picture 745.jpg](#)
[Picture 746.jpg](#)
[Picture 747.jpg](#)
[Picture 748.jpg](#)
[Picture 749.jpg](#)

Kim,
See attached top doctor report for Hydrocodones.

Thanks,
JESSE KAVE
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Fax 614-553-9508

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7000 Cardinal Place
Dublin, OH 43017
Phone: (614) 757-5524
Fax: (614) 553-6147

Code: OZTURK
Name: OZTURK, AHMET
OZTURK

, AHMET

Comment: >DIRECT LINE 526-2177

* REFILL LINE 781-0204

Address: 1623 13TH AVE

Address:

City, ST: HUNTINGTON

, WV

ZipCode: 25701 0000

Phone #: 526-2243,

Fax #: 526-2174,

DEA #: B01101512

DEA Suf:

NPI #: 1942206529

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/27/2012

Code: PAT1DA1

Name: PATICK, DAVID L
PATICK

, DAVID

L

Comment:

Address: 5170 US ROUTE 60 EAST

Address:

City, ST: HUNTINGTON

, WV

ZipCode: 25705

Phone #: (304)528-4637,

Fax #: (304)399-2383,

DEA #: AP1641085

DEA Suf:

NPI #: 1972546273

ST/PV #: 9111115

T/P #:

Doctor:

Group:

Probate:

DAW:

Degree:

Specialty:

Last: 02/24/2012

Code: TACKCH1
Name: TACKETT, CHANDOS DEWAYNE
TACKETT, CHANDOS DEWAYNE
Comment: EXT.4527/SHIRLEY FAX528-46*73
Address: 5170 US ROUTE 60 EAST
Address:
City,ST: HUNTINGTON, WV
ZipCode: 25705
Phone #: 528-4663, (304) 528-4527
Fax #: (304) 528-4624,
DEA #: BT3664504
DEA Suf:
NPI #: 1912933151
ST/PV #:
T/P #:
Doctor:
Group:
Probate:
DAW:
Degree:
Specialty:
Last: 02/27/2012

Physician Name	# Rx	Cost	Retail	\$Margin	%Margin	AVG PROF
Rx Num	QTY	Drug Name	Cost	Retail	Patient	Filled

Drug Code	Starting	Ending	StorageCell	Starting	Ending
NDC/DIN	HYDR105D1	HYDR105D1	Pack Size		
Drug STD			STD Pack		
SUBS Code			Drug Unit		
GPI			Schedule		
Gen Name			Canada Sched		
			Orig Sched		
TallMan Nm			DESI		
			Drug Group		
Carrier			Sub Group		
T/P Plan			Category		
T/P Group			Multi		
Drug Lot#			TherClass		
Manufact.			Ther Equiv		
Item #					

Hydrocodone 10/500

Warehouse	Reportable	Status	UPC	
Injectable	Written	StoreGen	Disp Sys	
Shelf Life	Starting	Ending	Starting	Ending
Disp. Life				
Drug Exp.				
DC Date				
Mfr DC				
MAC Date				
AWP Date				
Vendor				
MTD Usage				
YTD Usage				
Intr				
Coun				
Allergy				
Default Daw				
MAC Price				
AWP Price				
On-Hand				
PrcLst Qty1				
PrcLst Qty2				

ACQ Pcnt	UnitofUse
STD Pcnt	UnitDose
REG Pcnt	AutoFill
WEL Pcnt	AWPSrc
INV Cost	ACQSrc
Price Cd	
Reorder	
Comp Flag	All Drugs
Bubble Fee	ALL
Use / Print	
CentralFill	ANY
Mail Only	ANY
No Mail Order	
Refrigerate	
Signtr Reqd	
HAZMAT	
Bay	Shelf
Rack	Bin
AltGrp/Class	